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## STONY WOLD SANATORIUM FOR TUBERCULOUS WOMEN AND CHILDREN

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As THERE is at present such a keen and wide-spread interest in the prevention and cure of pulmonary tuberculosis, a description of Stony Wold Sanatorium, with a short account of its organization and general workings, may be of interest to the readers of THE AMERICAN JOURNAL OF NURSING.

Situated seventeen hundred feet above sea level, in the Adirondack Mountains, surrounded by forests of pine and fronting on a beautiful little lake, the location will seem an ideal one for the purpose. The institution, only a few yards from its own station, Kuahaqua, is nine miles above Paul Smith's, on the Mohawk and Malone Division of the New York Central Railroad, which runs through its property of seventeen hundred acres of land and lake. Malone, N. Y., is about thirty miles farther on the line, while a little more than two-hours' travel will take one to Montreal. The proximity of the railroad is one of its great advantages, avoiding the tediousness of a long drive for the patients and facilitating the transportation of supplies.

Stony Wold was incorporated in 1901. It is non-sectarian in every respect, and was formed by some noble-minded, philanthropic women of New York for the care of working-women, young girls, and children in the early stages of tuberculosis.

The proper care cannot always be given these people in their own homes, and it is especially to them that sanatorium life for a sufficient length of time may mean renewed health and fresh courage for the battle of life for those who not only support themselves, but are often the mainstay of the family.

In August, 1902, the corner-stone was laid by Bishop Potter with simple yet impressive ceremony, and the following autumn of 1903 saw the completion of the central building and one dormitory.

Besides the main building, the plan calls for four dormitories, the second of which has as yet only the foundation finished, and stands mutely appealing to the public for funds for its completion.

Two large rooms on the third floor of the central, or administration, building have been converted into wards for children, while the extra rooms in the same buildings, intended for the house staff, will meantime be used for patients.

Each dormitory is planned to accommodate twenty-four patients, and the one now occupied is filled; at present fifty patients can be accommodated. Every adult has her own room, which is attractively and comfortably furnished with due regard to the best hygienic conditions. When able, the patients take the daily care of their rooms, which are thoroughly cleaned once a week.

There are at present in the institution three boys and seven girls, ranging from eight to eleven years—boys over twelve are not admitted. These children, in the few weeks since their coming to Stony Wold, have gained several pounds in weight and are showing each day increasing benefit from the open-air treatment.

A competent teacher gives them instruction, classes being held each morning in the library. A physician and two graduate nurses are in residence, and as the work grows other nurses will be required.

While the cases are in the incipient stage much oversight is needed to insure the carrying out of all hygienic instructions, as well as in enforcing the *full* time to be spent in the open air. These women (the majority are but girls) require a great deal of mental stimulation and often much encouragement to induce them to persevere in what may seem to them, in their ignorance, a vain endeavor.

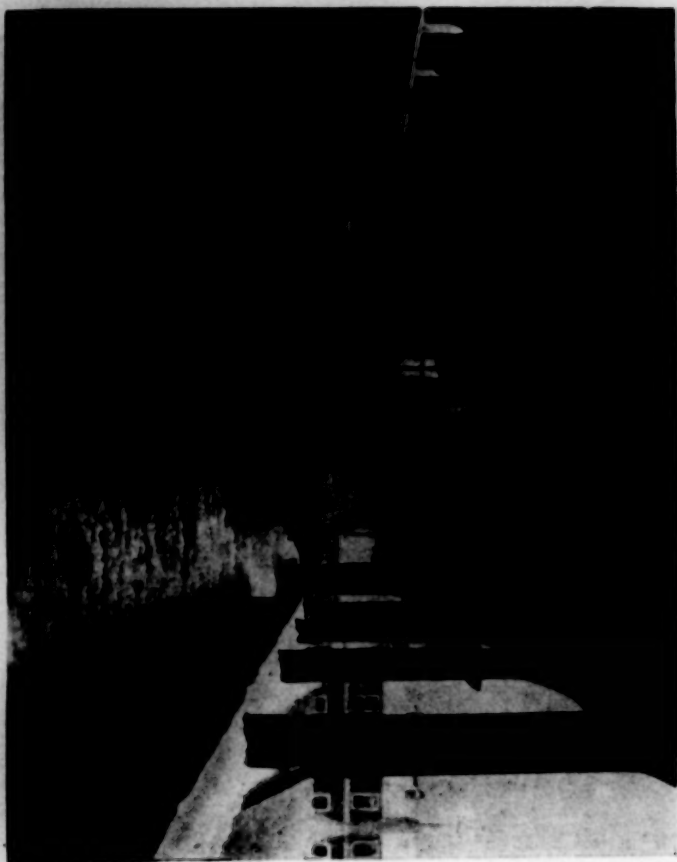
The work necessarily is largely educational. These people must be taught that tuberculosis is curable and preventable, and that if they are ignorant of or indifferent to the necessary precautions they become a source of great danger to their families and friends.

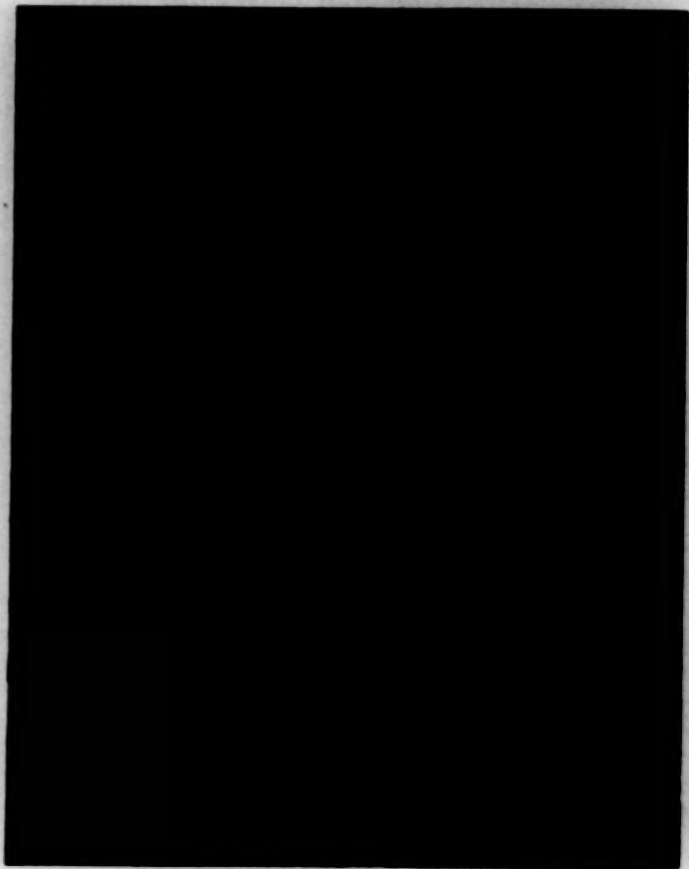
Authorities affirm that in sanatoria for consumptives, where the precautions concerning the sputa are most rigidly adhered to, one is perhaps safer from contracting tuberculosis than anywhere else. Patients returning from the sanatorium cured or improved bring with them the hygienic and sanitary education received in the institution and become distinct factors in the further prevention of the disease.

Experience shows that with proper sanatorium care seventy-five to eighty-five per cent. of incipient cases can be cured or so improved that



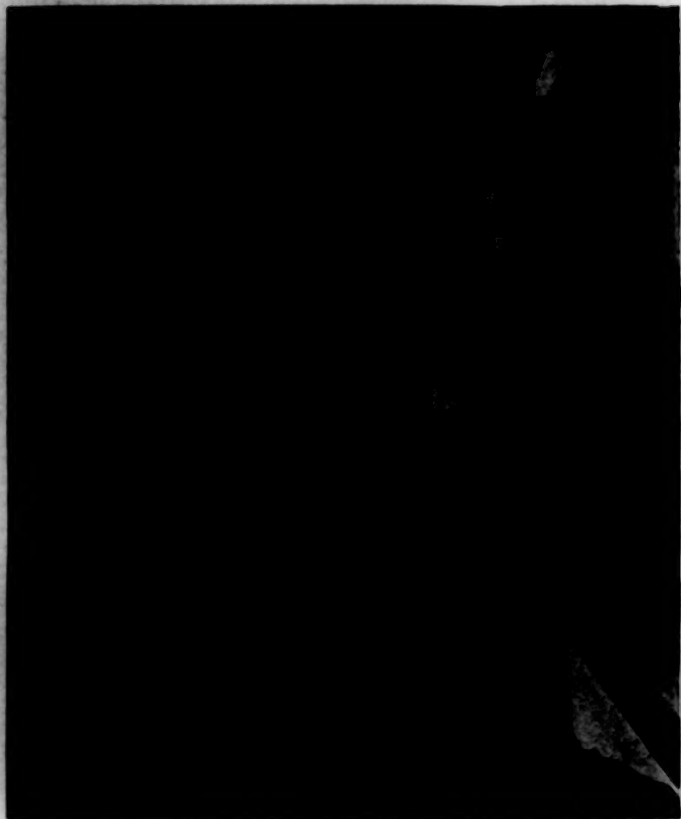
TAKING THE CURS AT STORY WOLD SANATORIUM



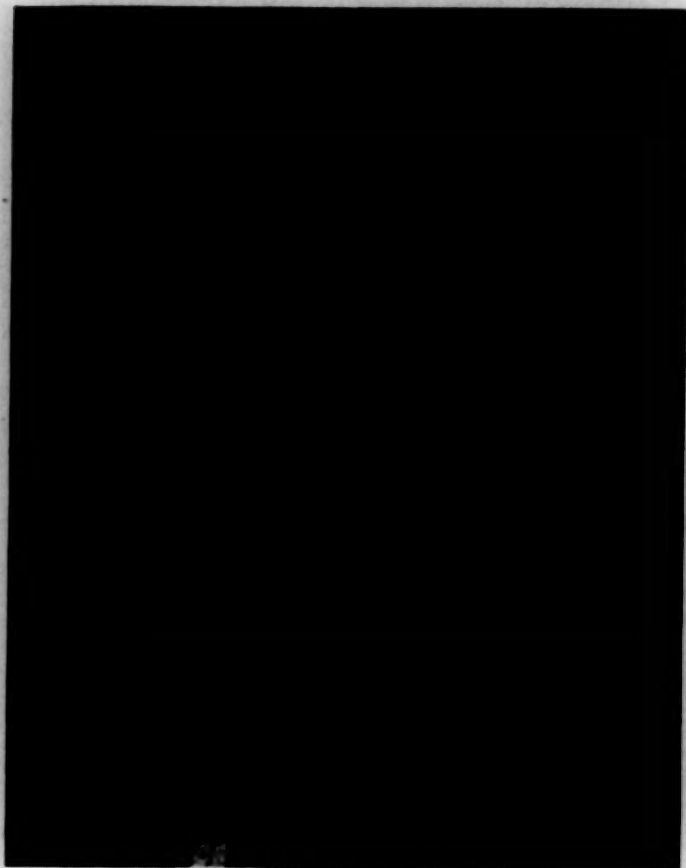


ASSEMBLY ROOM, MAIN BUILDING, STONY WOLD SANATORIUM

MODEL, SATU-MOON, COSMETORY A, STONY WOLD SAMATONHUA



SUN PARLOR, DORMITORY A, STONY WOOD SANATORIUM



they may again become working members of the community, thereby lifting from the city a tremendous social and financial burden. Dr. Knopf says "that as conditions are now in most of our cities and towns, the majority of consumptives are doomed to a certain and lingering death . . . the child of to-day is the man of to-morrow, and the more children we cure of this disease now, the smaller number of consumptives we will have to take care of in the future."

The immediate need of Stony Wold is a maintenance fund for the support of patients, as the majority are unable to procure sanatorium treatment for themselves.

Already two nurses are numbered among the patients, and the president, Mrs. James E. Newcomb, reports several appeals for assistance or information from others in different parts of the State. With a view of benefiting these most deserving of applicants it has been thought wise to endeavor to organize an auxiliary among the nursing profession for the support of one or more of its members who may have become victims of the disease.

A committee has been formed for this purpose, and annual subscriptions, from one dollar up, may be sent to the treasurer of this committee, Miss Grace Knight, Roosevelt Hospital, Fifty-ninth Street and Ninth Avenue, New York City.

Seven hundred and thirty dollars will support a room for one year.

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## THE WORK OF DISTRICT NURSES AMONG TUBERCULOUS PATIENTS IN BALTIMORE

By J. S. AMES

President Instructive Visiting Nurse Association of Baltimore

HAVING read with great interest the article by Miss Nutting, of the Johns Hopkins Hospital, on "Visiting Nurses in the Homes of Tuberculous Patients," in the April number of this JOURNAL, I thought it might be worth while to make a brief report of the work which has been done in Baltimore during the past eight years, during which time many of the problems mentioned by Miss Nutting have been met and, to a certain extent, solved.

The Instructive Visiting Nurse Association of Baltimore began its work in January, 1896, being able at that time to support only one nurse. On April 1, 1904, it was directing the work of six district nurses and of one extra nurse whose entire time is devoted to the care of cases of tuberculosis. During the past eight years a great deal of



attention has been given to patients suffering from tuberculosis of all kinds, and during the year 1903 one hundred and ten *new* cases, in addition to the two hundred and more brought over from the previous year, were taken charge of. It was felt by the association that the work among tuberculous cases would be greatly helped if there could be one nurse whose work could be limited to this. There are advantages in this division of work, but also great disadvantages. From the standpoint of the nurses themselves it is well, of course, to have as few nurses as possible exposed to the dangers of this disease, and special attention can be given this point if only a limited number of district nurses attend the patients. The great good to be accomplished, however, by nurses visiting the homes of tuberculous patients is in paying *repeated* visits, so as to see that the instructions as to the food, the hygiene, and the other conditions of the patient are carried out. It is much better, therefore, to have the work so arranged that patients may be visited at frequent intervals, and this is absolutely impossible in a city as large as Baltimore if there is but one nurse whose field of work includes the whole city. At the best she can visit a case but once in a fortnight or month, which is by no means satisfactory to anyone. The plan adopted by the Baltimore association is to have the special tuberculosis nurse work in coöperation with the regular six district nurses, with the result that weekly, and often daily, visits are paid the home of the patient.

Immediately after the Tuberculosis Exposition held in Baltimore in January of this year, to which so much had been contributed through the energy and interest of this association in preparing charts, taking photographs, gathering statistics, and interesting the people among whom they work, resulting in many of them attending the exposition and lectures, Mrs. William Oaler, the secretary of our association, made an appeal through the press of Baltimore for subscriptions to support a special nurse for tuberculosis cases. The response was immediate and most gratifying, Mrs. Oaler receiving within a week subscriptions sufficient to support a nurse for one year. She asked the association to direct the work of the nurse, and her request was eagerly granted. The tuberculosis nurse lives with the other nurses in the Nurses' Home, where she is provided with a room specially prepared with reference to her work. This is under the direction of the head nurse of the association, Miss M. E. Lent, and the opportunities for conference between the different nurses before the day's work begins are most helpful.

In discussing the methods of work which were established by the first head nurse of the association, Miss A. M. Carr, and which are still in use, special attention may be called to the following points:

*First, food.* The nurses give instruction to the families of the sick how to prepare suitable food, and they see, further, that they are amply provided with milk and eggs. They are able to do this last through the generosity of the Association for the Improvement of the Condition of the Poor of Baltimore, who furnish us with unlimited amounts of their "sick diet."

*Second, fresh air.* The nurses invariably are called upon to rearrange beds and furniture in the bedrooms and living-rooms of their patients, and they insist, if possible, upon the patients having separate rooms where the windows can be kept open. In many cases they are able to persuade the patients to sleep on balconies or in passages open to fresh air. The association has several cots which it uses for this purpose. Through the kindness of several friends we also have six rolling-chairs and as many more baby-carriages, so that we are able to have all our patients given an opportunity of sitting or resting in the open air. In this connection it should be added that no small part of the nurses' work is to educate the patients and their families concerning the need of air.

*Third, sputum-cups, etc.* For many years the association has been buying thousands of sputum-cups, handkerchiefs, etc., for distribution among their patients, and these are now in general use in hundreds of families in Baltimore. The patients are carefully instructed as to the manner in which they are dangerous to their families and to the community.

Whenever a patient dies or moves from one house to another careful disinfection of his room or house is secured through the Board of Health.

*Fourth, charts, etc.* At the request of the State Board of Health complete records have been kept of cases of tuberculosis, and most extensive charts have also been prepared and submitted to the board. These will doubtless prove most useful, as adding to the records of the State.

From what has been said it will be seen that the experience of our association during its eight years of activity has been such as to make us believe most strongly in the work of the visiting nurses in the homes of tuberculous patients, for it is only here that efficient work can be done; and although it is true that with six nurses doing general work, it is not possible to see more than three hundred cases of tuberculosis during the year, nevertheless, these are attended to in a far more efficient manner than would be possible with a single isolated nurse whose work is restricted to attending this one class of patients.

## THE RELATION OF OLD AGE TO DISEASE, WITH ILLUSTRATIVE CASES

By LOUIS FAUGERES BISHOP, A.M., M.D.

Visiting Physician to the Lincoln Hospital, New York City

OLD age is a purely comparative term, and there is no reason why we should not make a special study of it. It is a condition which is reached in the natural process of life and is difficult to define, except according to its characteristics. Some individuals at forty are older than are others at ninety. This is true not only of the body, but also of the mind. The process of growing old has certain characteristics, which are also seen in certain diseases, such as Bright's disease, paralysis, etc. It is not surprising to find that diseases of this class are founded primarily on disease of the blood-vessels, and are due to what is known as fast living, which, it is only logical to conclude, brings an individual to prematurely old age. Degeneration of the blood-vessels is the essential feature of old age, and the same conditions are found in the slower cases of Bright's disease. Every hospital has at times cases of Bright's disease, in which the patient had become feeble-minded, having lost his intellectual grasp and become childish. In Bright's disease we also see the development of paralysis, which is due to interference with the circulation of the blood.

The causes of early old age are the same as those of Bright's disease—the various forms of intoxication. Chronic poisoning from the prolonged use of alcohol causes a degeneration of the blood-vessels that tends to hasten the signs of old age. The next most important intoxication is that of syphilis. Attacking, as it does, the blood-vessels, there is no doubt whatever as to its tendency to hasten the development of old age. Still another intoxication is that produced by an injudicious diet. When a person eats a great deal more than is needed—particularly rich food, especially if combined with wine—the digestive apparatus is thrown out of order, and much of the product of the food has to be excreted in combinations of uric acid. The excess of food must be disposed of by the system in the best way possible. In this process, in attempting to take care of the surfeit of food, the chemistry of the body becomes disordered, and instead of the production of urea, we have the development of urates, and consequently the gouty diathesis. This is nothing more than deficient chemical action in the body when for some reason it is unable to complete its work. The same may take place through an error in the chemistry, but that is uncommon. In rare instances the same fault in the chemistry of the body may be due to other causes

than an excess of food, so that once in a while we find examples of gout in persons who hardly get enough to eat; however, such cases are infrequent. This error in the chemistry of the body, which we call the gouty diathesis, allows certain materials to be produced in the circulation which have the same effect upon the blood-vessels of the body as the other causes we have mentioned. We see, then, that old age may be hastened by an over-indulgence in food.

Another factor in producing pre-senility is overwork. The individual may be strongly attached to some form of labor, constant application to which, combined with worry, may result in disorder of the nervous control of the blood-vessels. The heart's action becomes affected, and there is brought about through the nervous system a condition of arterial tension. This leads to degeneration of the blood-vessels resembling that produced by gout, syphilis, and alcohol. We do not often, however, get these causes intermixed with the alcoholic habit. This kind of work hastens old age.

The process of growing old commences at maturity. Up to that time the process of growth is one of construction. From that time on it is one of hardening. This law is one that we cannot get away from, and it is quite important that we should recognize it. People who live to be one hundred years old are freaks, just as babies who are born with teeth, or who talk when a few months old. We learn very little from these. The same is true of a man who lives to be very old in spite of the abuse of tobacco and alcohol.

The object of this paper is to show some of the conditions that are met with in old people, and to explain something about the care of the old and infirm. There are certain principles that physicians learn from experience. One is that it is bad policy to keep old people in bed. The danger of becoming bedridden and of losing the ambition that keeps old people going is very great. In nursing old people it is better to err on the side of keeping them up than putting them to bed. The time when an old person gives up and yields all his dressing and washing to the nurse marks a mile-stone towards senility, of which most old people are conscious, and if he is not on his guard against its approach the nurses and those around him should be. It is very easy for old people to give up and hard for them to resume. They know this, and often one of the most difficult things for a nurse to do is to persuade old people to be waited upon. I could tell a good many interesting incidents of the way old people have resisted the care they really needed, and a good many examples of the ingenuity of nurses in taking care of these old people without their knowing it. I remember one old man, whom I had charge of for a long time, and who only com-

menced to grow old when he reached eighty. He positively refused to have an attendant of any kind with him, yet he would go about the city and get lost, causing a great deal of anxiety to his family. A nurse was introduced to him in the capacity of a butler, and this man always followed the old gentleman around. When the old gentleman got lost, the butler generally happened to be near and would walk along with him. This trained nurse was very ingenious and took care of the old gentleman for several years without his knowing it. He found that the old gentleman, although very rich, would persist in wearing his old clothes. When he got into the habit of wearing a particular garment he did not care to give it up. Some of the members of the family spoke to him about it, but to no effect. The nurse would tell the old gentleman that the coat, or whatever it was, needed new buttons or repairing, and an article very like the old one would be substituted, and the old gentleman would not know the difference. This shows that tact is better than persuasion.

Another thing that you must bear in mind is that old people cannot remember new things, also that they get accustomed to things which in a younger person would be injurious. You should not dictate to them as to the hours of rising and retiring, and to a great extent what they should eat. A very old person gets into a groove, and the nurse must not disturb it too much.

Recently the writer was called to an old patient with pneumonia. The trained nurse came and wanted to take off the clothing the patient was wearing in bed and to alter a great deal the surroundings of the patient. I did not think that wise with a person of seventy-five. She wore flannels in bed and had been accustomed to certain ways of dressing and having the bed in a certain way, and found it very difficult to change. As a rule, it is better not to disturb the habits of the old. It is the same way with stimulants. If an old person is accustomed to stimulants, he should have them. If a man is accustomed to tobacco, he should have it. You cannot with advantage alter the plans of life of old people.

In advanced life the memory for recent events—the things that happened yesterday and last week—is very slight, but the memory for things that happened long ago is strong, hence they are interested in things that happened long ago. Now, younger people, both doctors and nurses, find this very tiresome. If you try to interest senile patients in what is going on at present, you will probably fail in doing so. You must make a study of what interests them most. To do this, find out what interested them in their former life. They will usually brighten up, talk, and become interested. Old people tell the same story many times. Always listen as attentively as you can the first time the story is told. If you do so, you will generally get along with them



and they will think you are a good nurse; while if you treat old people like young ones, making them go to bed without flannels, putting them to bed early and not letting them up early, you will find that you cannot handle them so well.

The diseases of old age often resemble those of children. The diseases are not typical. Pneumonia is the most fatal disease with old people. What you must watch for all the time is the development of failure of circulation, because when a person dies of old age it is from failure of circulation. This failure may lead to the degeneration of the kidneys, or more often to paralysis, but in either case the cause is degeneration. The saying is, "A person is as old as his arteries." In old people you watch for signs of interference with the circulation, and this may be shown by a very slight thing—for instance, a little staggering, a little awkwardness with one hand or one foot, or the speech may be a little thick. Any of these may be the first sign of the development of paralysis. The treatment for this condition is to a great extent medicinal, and is of extreme importance. Thus, when the signs of the failure of the circulation are marked there are certain drugs that will postpone the catastrophe. These are the drugs that dilate the blood-vessels. The most important are the iodide of potash, or soda, and I have no doubt that old people can be kept alive a considerable length of time when the circulation is carefully watched and they are treated to prevent failure of the circulation.

**SENILITY.**—The foundation of nearly all organic disease of the nervous system, whether it is the failure of the brain in old age, or paralysis in younger people, lies in the blood-vessels.

The reason that syphilis attacks the brain is that it attacks the blood-vessels. This leads to a shrinkage of the tissues. Thus we see the resemblance between the effects of syphilis and those of old age. Old age affects the mind through the failure of the blood to circulate properly. The arteries of the brain are degenerated, and the blood no longer nourishes it well. The early signs of mental senility are probably not often improved by treatment, but the development of these early signs can probably be arrested by treatment.

**CASE I.**—A. B. is seventy-eight years of age. She presents very few signs of old age. Her blood-vessels are soft and her circulation seems to be in good condition. She states that she can remember things that happened a long while ago, but cannot remember incidents of a few days ago, which is very characteristic of the loss of memory that comes with old age.

**CASE II.**—C. A., according to her statement, has reached seventy-two. She shows a hardening of the arteries that is so often found in

old age. In taking her pulse, the artery gives a feeling like a row of beads; still, the artery is not peculiarly stiff and is in fair condition for her age.

CASE III.—E. F. is eighty-one years of age, and shows one of the unmistakable characteristics of old age, arcus senilis—the fatty degeneration around the iris as it joins the white of the eye. However, that is probably not well founded, as we find it in some people who are pretty young, and we do not find it in all people who show all the other signs of old age.

CASE IV.—G. H. is eighty years old and shows the characteristic arterial changes. She is blind and her eyes show the evidences of what the oculists call "phthisis bulbi," which is the shrinkage of the eyes, and for which there is no remedy.

CASE V.—I. J. is apparently one of those freaks that I have spoken of who live away beyond the natural term of ordinary human life. She shows an extreme degree of the degeneration of the blood-vessels, as indicated by the hardening and bead-like feeling of the radial artery. She says she is one hundred and two years old, and from her general appearance, and from the fact that we know that some colored people do live to that age, I have no reason to doubt her story. Her mental condition is shown by her general manner in talking to herself, which shows that she is approaching that state known as senile dementia.

CASE VI.—K. L. is ninety or more years old and shows the characteristic atrophy of the jaw which always goes with old age. The jaw is one of the most characteristic indications of age. If you notice a young baby, the mastoid process is hardly developed at all, and the jaw of the infant is very little developed. In middle life, or as you approach maturity, the process of the development of the jaw becomes full and square and is quite characteristic. If you will look among any group of people of middle age you will see that they have full, square jaws. They have reached maturity and their jaws are fully developed; but if you notice the old people, without exception, you will notice that the jaws are lighter, particularly after losing the teeth. This atrophy leads to the loss of the teeth. The jaws are very thin. Some old people show an extreme degree of atrophy of the jaw caused by old age, which goes on more rapidly after the loss of teeth. This relation of the teeth to age is very curious; it is a fact that people who live to a great age often retain their teeth. Most of our famous men who have lived to a great age have usually retained their teeth until death.

There are one or two other things in connection with old age that are of special interest. The eye undergoes certain changes that are very characteristic. In early life the power of accommodation is very great.

If you have ever noticed a baby, you will find that it looks closely at an object and accommodates itself to very near vision. Up to the age of forty people focus their vision to a convenient distance. About that time you will find when you try to read that your arm is not long enough, and old people have to get new glasses from time to time, which is a characteristic indication of advancing age. Of course, a near-sighted person does not have to do that.

The hearing generally becomes impaired during the process of growing old, so that most old people are not quite normally acute in their hearing.

The pulse-rate becomes slower in old age, and that, too, like the changes in the eye, is a process that goes on from birth. At birth the pulse-rate is about 140. During the first year it falls to perhaps 100, and gradually goes down at maturity, when it averages 72. In old people you will find the pulse somewhat slower. That is one of the processes that goes on, like those of the eye, throughout the whole course of life.

The lessons that we are to learn about the study of old age is, that it is inevitable, and we must adapt our practice to the age of the individual. You must not treat a young child as you would a grown person, nor must you treat an old person as you would one in the prime of life. For a person in the seventies it is not worth while to make any great sacrifice in the way of money and associations to go in search of health, because the probabilities are that the disturbance of the routine to which he has been accustomed through many years will do him more harm than any climate will do him good. Again, old people do not stand accidents or operations well. They live in a state of equilibrium, and any great shock is liable to disturb their balance and lead to death.

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## A SCHOOL FOR SOCIAL WORKERS

By M. ADELAIDE NUTTING

Superintendent Johns Hopkins Hospital School for Nurses

Nurses will share with other trained workers the general interest which is aroused by the recent announcement that Harvard University and Simmons College, the oldest and the newest of our institutions, have united in establishing what is called "A Training-School for Social Workers." This is, briefly, a school for the training of men and women in the practical administration of public and private charities. That great need exists for the training which a school of this nature will provide no one at all familiar with social problems can for one minute doubt,

and it is gratifying to know that the first permanent school established for this purpose should be under the auspices of two such institutions as Harvard, the oldest university in America, and Simmons College. The Board of Administration of this new school will include President Eliot, of Harvard, and President Lefavour, of Simmons, and the director is Dr. Jeffrey M. Brackett, of Baltimore. Dr. Brackett has been well-known for many years as director of most of the important private charities, and of late as Supervisor of the City Charities of Baltimore. He has been a lecturer of the Johns Hopkins University, and is president of the National Conference of Charities and Correction. Those living in Baltimore know him as the friend, helper, and adviser of all who are interested or engaged in any form of worthy social work, and his loss will be deeply felt in those centres of social and philanthropical activity which he has done so much to develop, and upon which he has left so strong an impress.

The new school will be the first established in this country to give definite and systematic instruction in the whole field of social work. According to the announcement, it is "A School for the Study of Charity, Correction, Neighborhood Uplift, and Kindred Forms of Social Service." It purposes to give to young men and women wishing to study these problems opportunities of doing so by practical methods under careful supervision and instruction, which is given alike to those who would become officers of institutions or would serve as volunteers. The topics included in the programme of instruction cover a wide ground. Some of them are:

The aim of social service.

Knowledge of standards of living, of neighborhood needs and resources.

Improved housing. Hygiene of occupations.

The settlement movement.

The scope of charity.

Causes of dependency.

Public aid and private charity.

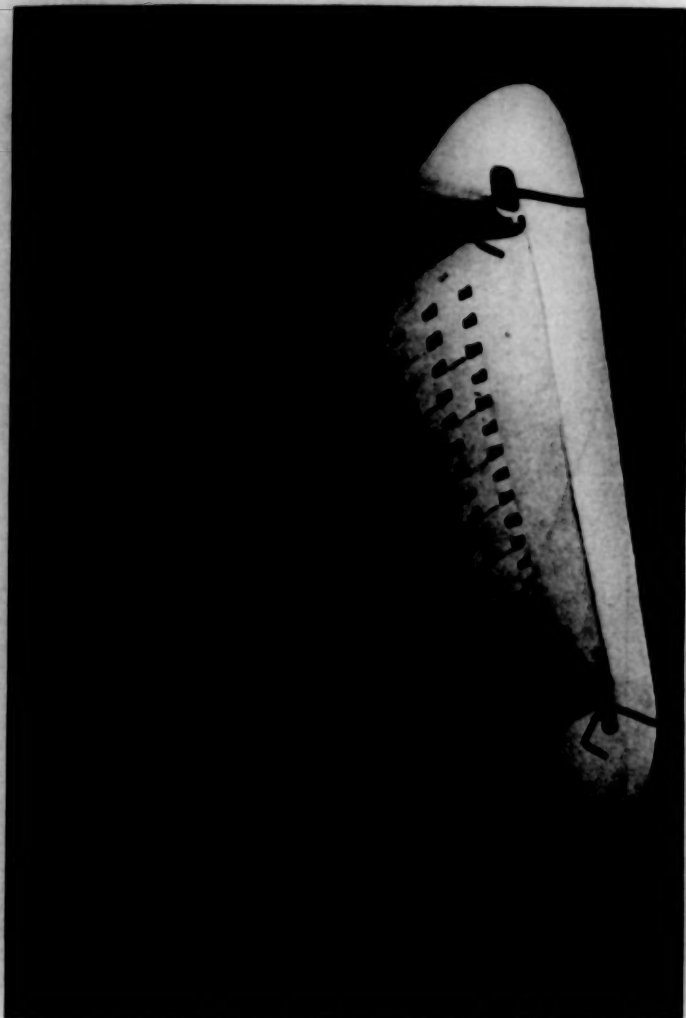
Treatment of needy persons in their homes.

The care of children out of their own families.

Sanitary and preventive measures.

Instructive visiting nursing.

It will be seen at once that there is no agency for the relief of need that is not here considered, and visiting nurses will be quick to recognize the value which such an opportunity for study as is here offered presents for them. There is no phase of the work above outlined with which they may not come in contact in their daily rounds. Their usefulness to the community is in direct proportion to their ability to understand and



5. HATMOCK FOR USE IN BATHING CHILDREN





6. SWEAT-BATH APPARATUS

handle wisely questions of a distinctly social nature, into contact with which the call for their professional services has led them. It is understood that special opportunities will exist for visiting nurses to take advantage of some portions of the course of study. The school will be opened early in October, 1904, in Boston, near the centre of the city. The course will cover one academic year, ending in June, 1904, at which time a certificate will be given to those who have been in attendance. Those desiring further information may obtain it by writing to the director, Jeffrey M. Brackett, 8 Park Street, Boston, Mass. Persons wishing to enter the school may see the director by appointment in Boston from May 15 to June 15 and after September 15.

Mr. Brackett will be assisted in his work by Miss Zilpha D. Smith, for many years general secretary of the Associated Charities of Boston, recognized as a leader in training workers, paid or volunteer.

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**APPLIANCES EXHIBITED AT THE MEETING OF THE  
AMERICAN SOCIETY OF SUPERINTENDENTS OF  
TRAINING-SCHOOLS FOR NURSES IN PITTSBURG,  
OCTOBER, 1903**

BY CAROLYN C. VAN BLARCOM

The Johns Hopkins Hospital.

(Continued from the March number, page 437)

**HAMMOCK FOR BABIES.**

THE hammock shown in the accompanying cut is another adaptation of the stretcher which has been described. (Fig. 5.)

It rests upon hooks hanging from the sides of the tub, but does not reach the water-level. It is found to be a great convenience when bathing such children as may not be put into a tub of water because of plaster or other dressings, for a child resting upon this hammock and covered with a bath blanket is warm and comfortable, and, being just above the water, may be given a thorough soap-and-water bath without the necessary articles having to be carried to the bedside.

In giving morning baths to several children this simple device, which is used in the orthopaedic ward at the Johns Hopkins Hospital, lends no small aid in saving time during the busy morning hours.

**SWEAT-BATH APPARATUS.**

The sweat-bath apparatus which was demonstrated consists of an elbow of stove-pipe thickly covered with asbestos and attached to a tripod

and Bunsen burner. The lower end of the pipe stands well off the floor, supported by the tripod, while interposed between these is the Bunsen burner. The latter may be connected with a convenient gas-jet by means of long rubber tubing. (Fig. 6.)

This appliance is for use in giving sweat-baths when hot air is the form of heat desired, and in many instances has accomplished the desired results when other methods employed to induce sweating have been inefficacious. The patient is prepared as usual; resting upon a blanket and mackintosh, is well covered with another blanket, so that no part of the body excepting the face is exposed. Over this is fashioned a tent of one or two cradles and the necessary number of blankets and a mackintosh, the whole being covered by a sheet or bed-spread. These coverlets should be well tucked in along the sides and foot of the bed and about the patient's shoulders to provide against the escape of heat. The stove-pipe stands at one side of the bed about two-thirds of the way down, or at the foot, while the upper end projecting into the tent introduces a current of hot air generated by the gas-flame below. The intensity of the heat may be regulated by the size of this flame.

The advantages of this appliance are in its safety and stability. (Fig. 7.)

#### STEAMER.

Another interesting appliance demonstrated was a steamer, the device of a nurse, for use in nursing diphtheria, croup, or any of the various troubles which are relieved by a moist atmosphere. It is essentially an ordinary teakettle with a telescoping spout and provided with valves and gauges which make it impossible for the water to boil over. By means of these the nurse is kept constantly informed as to the height of water in the kettle.

The receptacle for water, raised upon secure legs, should stand over an alcohol-lamp upon a table covered with asbestos. Because of the long spout the kettle may be placed at any desired distance from the bed and still have the source of steam quite near the patient, thus reducing to a minimum the danger of igniting the bed-clothes or scalding the patient. (Figs. 8 and 9.)

#### STUPES.

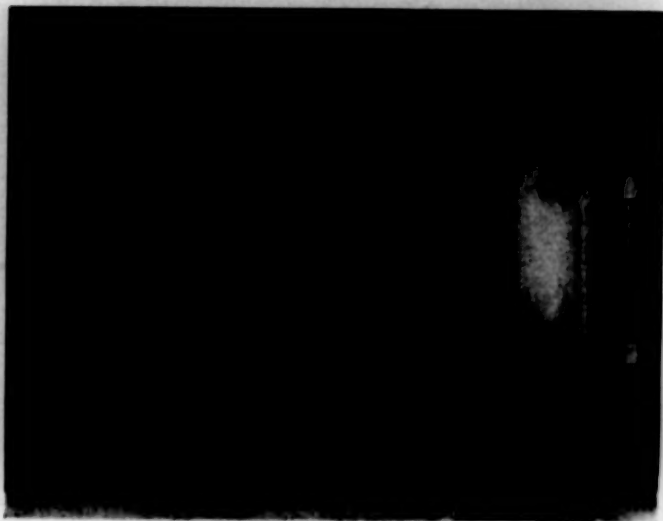
The stupes which were exhibited bear mention because of their being very light in weight and capable of retaining their heat for a long time. They are made of two thicknesses of soft flannel of any desired size and shape and filled with carded lambs' wool, tufted at intervals to avoid lumping. Such a stupe wrung out of hot water as dry as possible, covered with oiled muslin or some of the light rubber tissues now in the market,



7. SWEAT-BATH APPLIANCE READY FOR USE, WITH FOOT OF BED OPEN TO SHOW ARRANGEMENT OF BEDCLOTHES

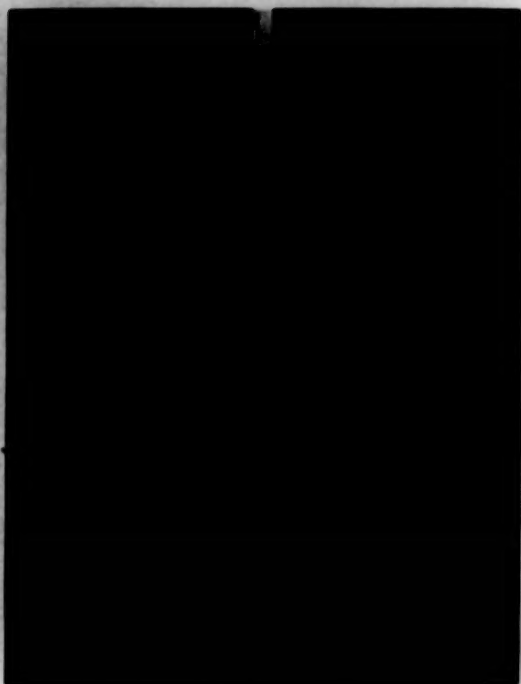


8. STEAMER—FRONT VIEW, TUBE EXTENDED

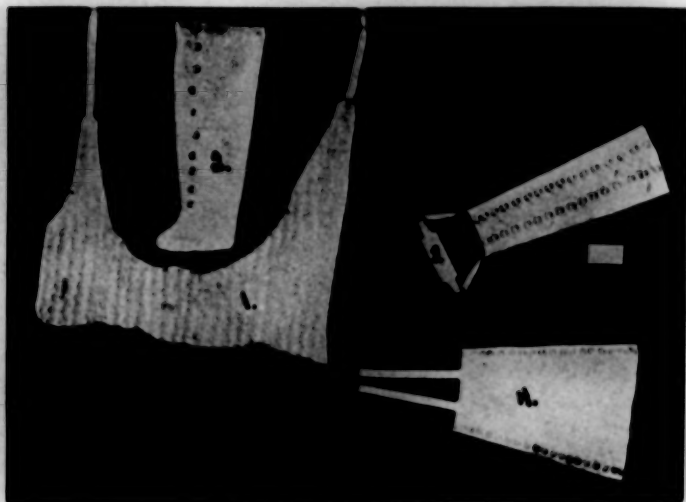


9. STEAMER—BACK VIEW



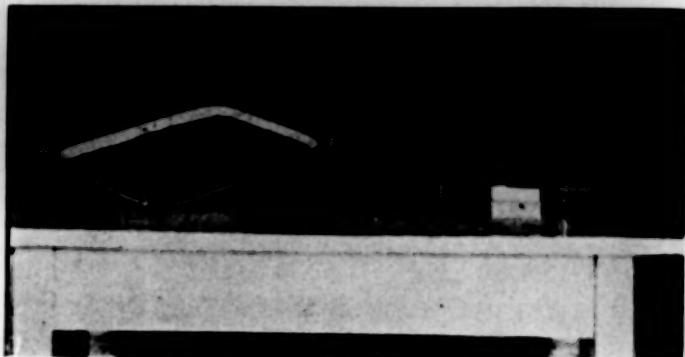


10. PNEUMONIA BAG



#### 11. EXTENSION STOCKINGS

1. For suspending leg from over-head bar.
2. Woollen legging with quilted foot.
3. To replace bandage and adhesive strapping in Buck's extension (closed.)
4. The same (open.)



#### 12. TRAY RACK

and a dry stupe, supplies a hot but very light compress which is most acceptable to patients who look for relief from hot applications.

#### PNEUMONIA BAG.

The ice-bag for pneumonia patients closely resembles the ordinary ice-cap in its general structure, but by virtue of its size and shape is admirably adapted for use by such patients as require cold applications over a large area—for example, a chest, back, or side in pneumonia. It consists of a rubber pillow fifteen inches long by twelve inches wide, with a screw top at one end about three inches in diameter which offers an opening for the introduction of crushed ice. Held in place by means of a binder, it proves to be quite a satisfactory solution to the problem of applying cold to a territory which exceeds in size the ordinary ice-cap. (Fig. 10.)

#### ICE-CAP COVER.

The little ice-cap cover has found favor among nurses attempting to keep ice-caps over the hearts of restless patients. It is a square slip much like a pillow-case, with the open side provided with tapes for closure, and at each corner a long tape is securely fastened. After the bag has been applied over the heart, the tapes from the two upper corners are tied about the patient's neck, while the two lower ones pass around under the arms, thus preventing the ice-cap from slipping up, down, or to the side.

#### EXTENSION STOCKINGS.

Three extension stockings were demonstrated which have been devised to relieve some of the discomforts experienced by patients having their legs in extension. The first is a woollen legging with a quilted lambs'-wool foot, to be used upon a patient whose leg is flexed at a right angle to the body, as is the case in an over-head extension. It usually taxes a nurse's ingenuity to keep this isolated member warm, so that the protection offered by such a stocking, which slips on over the dressing and bandages, is indeed a comfort.

The second is one which, though used with relative infrequency, merits demonstration because of the relief it has afforded to those patients whose legs are swung to an over-head bar, with the lower part, that below the knee, parallel to the bed and extension made at the foot. The stocking amounts to a hammock, which is carefully shaped to the curves of the leg and ankle, so that when suspended from the over-head bar all parts of the limb are equally supported, which is a much less trying adjustment than straps placed at intervals to swing the leg into the desired position. (Fig. 11.)

The third stocking really does duty as a bandage, since it was devised to replace the adhesive strapping and roller bandage used in putting up a Buck's extension when for any reason—for example, abraded or reddened skin—such a dressing may seem inadvisable. With weights fastened to the straps at the lower margin of this stocking after it has been snugly laced from ankle to knee, the same even traction may be made as when the spiral adhesive bands are used, though a little closer vigilance must be exercised, for the stocking slips and becomes loosened from time to time. One advantage worthy of mention is the possibility of dressing the painful areas that are occasionally seen after a leg has been in extension for a very long time, and at the same time keep up the extension by applying this stocking over the dressing, thus relieving the local discomfort without interfering with the treatment.

#### TRAY RACK.

The tray rack is a simple affair fashioned of bent wire with the idea of holding the covering over a tray of nourishments or a patient's meal, well above the dishes and their contents. (Fig. 12.) It consists of a rectangle approximately the size of the tray, with six legs about four inches long, one at each corner and one on either side. With the wire curved a little at the extremity of each leg it is possible to rest two on top of the tray and slip the other four just under the edge, thus securing the rack while the tray is being carried from diet-kitchen to patient, after which it is easily removed.

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### WHAT REGISTRATION OF NURSES WILL DO FOR THE PUBLIC\*

BY CONSTANCE V. CURTIS

Superintendent Phoenixville Hospital and Vice-President of the Graduate Nurses' Association, State of Pennsylvania

THERE has been a great deal said and written of what registration will do for nurses and the medical profession. Very little has been said of what benefit it will be to the public. I will try to show some of the many advantages the public will gain from State registration of nurses.

We, as a nursing body, know of the many shortcomings and deceptions practised by those who falsely represent themselves to be trained nurses. The country is flooded with them. These women, sometimes,

\* Read at the meeting in Wilkes-Barre.

have been in a hospital only from one to six months, and have then been dismissed for improper conduct. They were wholly unreliable and unfit to care for the sick. They cannot belong to our profession without being discovered, though sometimes we do not discern their deception until they have made serious mistakes.

Unfortunately, our profession offers to women who are unprincipled and insincere an opportunity to take up the work as a cloak. On the other hand, fortunately for the profession, the women who have charge of training-schools for nurses have developed so keen an insight into human nature that they discover such deception and dismiss women of this type, though they may have remained in the hospital long enough to pick up sufficient information to be able to pose as trained nurses. They will wear a uniform and assume all the assurance of manner of one who had been thoroughly trained.

A case of this nature came under my personal observation. She posed as a trained nurse. She had a very sweet, plausible, and impressive manner. She took charge of a very serious typhoid-fever patient, who was taken sick quite a distance from home and among strangers. A friend wrote to the patient's family and told them that he had typhoid fever, but had an excellent nurse and a good doctor. When they heard this, having had the utmost confidence in trained nurses, his friends felt at perfect ease in regard to his condition. When a member of the family went to see the patient she began questioning the nurse as to where she studied nursing, etc. After trying very hard to evade the questions, it was discovered that she had never been inside of a hospital as a student nurse.

She had neglected her patient dreadfully, and when he tried to complain to the doctor she would say he was delirious. She had never given him a bath. The patient had a bed-sore. She would not give him ice, milk, or water. What few friends he had, she would not allow in to see him, saying he was too ill to receive visitors. He said no one knew what torture he went through with the nurse.

When the physician who had charge of the case was asked why he engaged such a person, he said she told him she was a trained nurse, besides, she wore a uniform and some kind of a badge. He was much surprised when he was told how she had neglected her patient and his orders. The patient said he would hear the doctor tell her to give him ice and water, and then she would not give it. She was such an impostor that she had thoroughly hoodwinked the doctor. She made him believe she was carrying out his orders perfectly, and had the audacity to charge twenty-five dollars per week!

It is from women of this type, and of others who have a great

many more serious faults, and I may say vices, from whom we are anxious to protect the public. We desire the public to know just how important it will be to ask, "Are you a registered nurse?"

What person would be willing to trust a dearly loved member of his family to be nursed through a serious illness or operation by such an individual as I have described above? The public are being continually exposed to such frauds. They do not know what measures to take to protect themselves. It is very hard to properly discriminate between real worth and pretence. The public are not always in a position to judge.

If you find you have been duped with one of these fraudulent nurses, and you have trusted her to care for some member of your family that is dear to you, you will be willing to exert yourself to the utmost in helping us to secure State registration of nurses. After registration a record will be kept so that we can know each year if our nurses are living up to the standard of our profession.

Our standard must be high. The woman who enters the profession must be noble and broad-minded in order to be able to meet the demands made upon her and be a help to mankind.

State registration will bring about a more uniform standard in the teaching and requirements in our training-schools. It will bring them into more harmonious contact with each other. All these advantages will have far-reaching, broadening, and beneficial effects. It will awaken new interests in our women. They will read and study more, and will keep pace with the rapid advancement in the education of nurses, which is increasing each year.

Now, I hope that everyone knows and understands that we do not wish to keep anyone from nursing. A very prominent man said to me he did not know whether he approved of State registration of nurses or not, as he might be sick and might want his wife to nurse him. He did not think we should have a law permitting only trained nurses to care for the sick. Nor do we. Anyone who wishes to do so may nurse, and any person is at perfect liberty to have anyone nurse him whom he may wish. The only thing we ask is that she nurse under her true colors. If she has been in a hospital one or two months, let her say so, but do not let her sail under false colors by wearing a uniform and charging trained nurses' prices.

At one time nurses were regarded with distrust and people had them as necessary evils. At present the public, from the richest to the poorest, appreciate their great worth and deny themselves comforts that they may have their sick well cared for. They are given unbiassed and unquestioning confidence. The true, whole-hearted, unselfish, acceptable



nurse is worthy and deserving of all the confidence that can be bestowed upon her.

Our profession is one which exacts honor and a strict code of ethics. We need to be self-critical, and in this way we will learn what our needs and defects are. One of the most serious faults of human nature is to feel no doubt of one's self-competence.

Weir Mitchell says, "There is a limit to everyone's intellectual or technical attainments, but there is none to one's growth in goodness."

Another famous doctor says: "All physicians, especially the hospital men, appreciate the indispensability of the trained nurse. He never stands in the operating-room without a sense of gratitude and admiration for the splendidly trained women about him. The preëminent position which American surgery occupies in the world to-day is very largely due to the superior intelligence and education of the faithful women who assist in the operating-rooms and wards."

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## **SPECIAL COURSE IN HOSPITAL ECONOMICS—1904-1905**

### **COLUMBIA UNIVERSITY, TEACHERS COLLEGE, NEW YORK**

THE course in Hospital Economics has for its purpose the preparation of trained nurses who have the necessary qualifications to be teachers in training-schools for nurses and superintendents of hospitals and training-schools. Its aims are to eventually bring about a uniformity in training-school curricula and methods which shall make the training of a nurse practically the same in every training-school connected with a general hospital in the country.

The American Society of Superintendents of Training-Schools for Nurses is responsible for the development of the course, and in order to secure a carefully selected group of students it has appointed a Board of Examiners of experienced superintendents to receive and to pass upon the names of all candidates for the course. The examiners first consider the qualifications of candidates as practically trained nurses on the basis of their certificates and of statements from the superintendents of the schools from which they have been graduated. In addition, the Board of Examiners requires (a) evidence of the satisfactory completion of an approved course (1) in a secondary school, normal school, or college, and (2) in a nurses' training-school—this latter to include anatomy, physiology, materia medica, applied bacteriology, and urinary analysis, together with the general knowledge of practical nursing obtained from a two- or three-year course in a general hospital; and (b) that the candidate shall have held some position of responsibility in a



hospital subsequent to her graduation, that she enter Teachers College for the full academic year of about eight months, and that she will before this term spend from three to four months in doing private duty. Then, after this year of extra preparation, having passed satisfactorily the required examinations, she will receive a certificate, signed by the dean of Teachers College, as a qualified teacher for a training-school for nurses.

#### ADMISSION—GENERAL REGULATIONS.

1. It is desired that all applications be made during the spring and early summer. For application papers for the next term apply to the acting chairman of the Board of Examiners, Miss Anna C. Maxwell, Presbyterian Hospital, New York.

2. Each candidate must present to the college a recommendation for admission from the Board of Examiners certifying to her moral character and her qualifications for undertaking professional work.

3. No candidate can be admitted who is not in good physical condition.

4. Students admitted to any class are held on probation until the end of the first half-year. Any student who fails to pass in at least one-half of her work during this period of probation will be dropped from the roll of the college.

5. Registration begins one week before the opening of the academic year. Students are required to present themselves for registration not later than the Tuesday preceding the opening day, which falls annually on the fourth Wednesday of September. Enrollment at a later date is permitted only to those who obtain the consent of the appropriate committee, good cause for the delay having been shown, and who pay an additional fee of five dollars. The presence of all students is required on the day immediately following the close of all vacations and recesses.

6. All matriculated students in the Hospital Economics Course are under the charge of the standing Committee on Undergraduate Students. At the time of registration each student must file with the registrar a list of studies for the year approved by this committee of the faculty. No change will be permitted in such registered lists except with the consent of the committee, and no credit will be allowed for any course not approved and registered in this manner.

#### COURSE OF STUDY.

Required (6 points):

PSYCHOLOGY A—Elements of psychology, and

EDUCATION 10—Educational psychology—(together) 3 points.

HOSPITAL ECONOMICS 10—Methods and practice—1 point.

HOSPITAL ECONOMICS 12—Hospital and training-school organization and supervision—2 points.

Elective (9-12 points): The following courses are recommended:

BIOLOGY AND PHYSICAL EDUCATION 3—Physiology and hygiene—2 points.

BIOLOGY 12—Bacteriology—1 point.

DOMESTIC SCIENCE 10—Foods—2 points.

DOMESTIC SCIENCE 11—Foods, advanced course, dietetics—1 point.

DOMESTIC SCIENCE 12—Food production and manufacture—2 points.

DOMESTIC SCIENCE 13—Household mechanics and sanitation—2 points.

DOMESTIC SCIENCE 14—Household chemistry—3 points.

HISTORY 10—Economic and social history of the United States—2 points.

PHYSICAL EDUCATION 10—Applied anatomy and physiology—2 points.

The credit given for courses is scheduled in *points*, one point representing one hour of class work per week throughout the year. Two hours of practical work, as in shop, laboratory, or school-room, count as one hour of class work.

Students who can satisfy the requirements in any subject may, with the approval of the dean and the head of department concerned, elect other subjects of equal credit in any department of the college.

Further general information concerning Teachers College is contained in the general "Announcement," a copy of which will be sent on application to the secretary of the college.

#### SUBJECTS OF THE COURSE.

The subjects enumerated in the course of study are, with the exception of Hospital Economics 10 and 12, regular courses of the college. Teachers College is a professional school for the training of teachers; hence its work is directed towards teaching, even in courses which are usually offered in colleges and universities. Some of these courses are intended especially to lay the foundations for a scientific theory of education; others are directed towards the practical work of teaching, and yet others seek to give the intending teacher a better knowledge of the subjects to be taught.

#### FEES AND EXPENSES.

The fees of the college are as follows:

##### For matriculation:

Required of all students on first entering the university; paid but once. (For late registration, see General Regulations)..... \$ 5

For tuition (per annum)..... 150

##### Laboratory fees:

Students who take laboratory courses will be required to pay the special fees for supplies and materials stated in connection with the several courses.

##### For use of gymnasium:

Teachers College gymnasium ..... 5

This fee entitles the student to a physical examination, a locker, and the free use of the gymnasium and the baths, including

all necessary laundry service. It is required of all students who are not excused because of physical disability.

*For examination and graduation:*

For examinations at unusual times .....	5
For any diploma .....	5

#### RESIDENCE.

A hall of residence for the women students of Columbia University, known as Whittier Hall, erected by the Morningside Realty Company at an expense of over one million dollars, its administration vested in the dean of Teachers College, adjoins the college on the east. The head of the hall is a woman familiar with the needs of college students; she is aided by a corps of competent assistants, among them a nurse who gives whatever attention is required by residents in case of slight illnesses. The directress of Teachers College also resides in the hall and has a part in directing its social life.

The prices for furnished rooms, including board and laundry, are as follows:

Single rooms .....	\$220-400
Study and bedroom .....	420-575
Two rooms and bath .....	600-800
Two rooms and study .....	700-835

These rates are for the academic year beginning September 28, 1904, and closing June 14, 1905, and are payable in ten instalments,—viz., three-tenths upon entrance and one-tenth upon the first of each month thereafter until paid. No deduction is made for absence during the year, but in case of withdrawal one-half rates will be charged from the time the key is given up until the room is rented again.

A deposit of ten dollars is required of all applicants, and is retained until the end of the academic year, when it is returned less the amount assessed for any damages to room or furniture.

A descriptive circular with diagrams will be sent to any address on application to the secretary of Whittier Hall, 1230 Amsterdam Avenue, New York City, or to the secretary of Teachers College.

Lists of other boarding and lodging places are on file at the office of the directress of the college, who is prepared to give advice as to desirable accommodations or rooms.

Students' entire expenses have been found to vary from three hundred and seventy-seven dollars to six hundred and sixteen dollars and upward, averaging about five hundred and fifty dollars.

Full circular of the special course will be sent on application to the secretary of the college.

## THE TRAINING OF BABIES

By KATHERINE DeWITT

Graduate Illinois Training-School for Nurses, Chicago

(Concluded from page 591)

TO TRAIN a child to the use of a nursery chair would hardly seem to come within the province of the trained nurse very often, except as the head nurse of a children's ward may labor with her little charges, but I think the obstetrical nurse may often start a baby on the right path, and may inspire the nurse-maid who is to succeed her to keep up the good work if she will only take a little trouble. Mothers of all classes seem to be rather careless in the early teaching of regular and cleanly habits. The little street children who are brought to our hospitals are often wearing diapers at the age of two and even three years, and in the homes of the well-to-do they seldom graduate from them before the age of a year and a half or later. The teaching should begin when a baby is six weeks old, if it is well and strong. Before that age it is better off to be left with as little handling as possible, and its back is too weak for experiments. At six weeks the baby is having only a few movements a day, and one can encourage it to have two regularly at the morning and evening toilet. When the baby is undressed the nurse leaves its shirt, band, and socks on, so that it may not grow cold, and holds it out over a chamber or basin. The attitude suggests what is expected, and the baby is almost sure to expel some gas and to have a small movement. Possibly it will urinate also. If this habit is kept up regularly and persistently, it will gradually learn to have its movements at those times rather than at others. In another week or two it can sit on a small agate-ware chamber, which should be held on the nurse's lap, so that the baby can lean back against her, its knees or feet in her hands. In all such trials the baby must be in a comfortable, unstrained position, or it will cry and no good result will follow.

To teach the baby to urinate in the chamber is not quite so easy, but it is possible if watchfulness and patience are used. Whenever the baby wakes from a nap or comes in from a ride it should immediately be held out, and when it is old enough to be awake much, it can be put on the chamber at regular intervals for trial. It is amazing how soon the baby grasps the idea and waits to be put on, usually making some little signal of warning, which the nurse must watch for and learn to interpret. Often a little, peculiar cry or grunt will announce that it wishes aid.

A Scotch nurse-maid, whom I had left in charge of one of my babies, and whom I had warned to watch for his signal, when he should have evolved one, came to me with great pride, later, to tell me she had discovered that he put both thumbs in his mouth and looked intently at his fingers when he was ready. Children love cleanliness when they are brought up to it, and early learn to wait for help a few moments rather than have the discomfort of a wet diaper. I have known babies who were completely trained at six and seven months, and who wore drawers at ten months or a year. Probably all normal children could have as good records, and how much pleasanter such habits are for all concerned—the baby, the nurse-maid, and all the baby's family. I have heard women groan over the memory of journeys taken with a young child, during which time their state-rooms were festooned with drying diapers, and great numbers had to be carried along to insure comfort. I was much pleased to hear of a journey taken this winter from Chicago to Los Angeles by a mother with two well-trained children. The elder baby, aged eighteen months, has been so long established in her good ways that no one gave her a thought, except when she asked to be taken to the toilet-room. The baby boy of four months was partly trained; his invaluable little chamber was taken along, and only an occasional wet diaper had to be rinsed and dried.

As a child grows older it is more difficult to train it if it has been neglected. I remember my despair in hospital days over children old enough to talk who had no idea of telling of their needs. Rewards and punishments were alike unavailing, they were so unused to self-control. I am sometimes in households where a child of a year or a little over is being taught. After it has learned to have its movement on its chair,—and that lesson usually comes first,—if it is slow about telling when it wishes to urinate, the lesson is sometimes learned more quickly if it is put directly into drawers. A few mishaps occur at first, but the wet drawers are so much more uncomfortable than a wet diaper that the poor baby soon tells for its own greater comfort.

It is often through the ignorance of its care-takers that a child's training is left until so late; its mother does not realize that earlier training is possible, and our duty in this line should include the enlightenment of the baby's guardians as well as care for the baby itself.





**SUMMER SESSION OF COLUMBIA UNIVERSITY**

THE attention of readers of the JOURNAL is called to the following extracts from the "Announcement of the Summer School of Columbia University" for the present year. Among the many courses offered for the general student, those on domestic science, physical education, and chemistry include subjects of special interest and attraction to nurses, from which we quote some which seem to us the most useful. The course "Chemistry of Food" in especial (chemistry of food and nutrition) will be largely devoted to subjects which bear directly on problems which all nurses meet: for example, the nutritive value of typical "prepared" foods; the composition of cow's milk and its modification to any desired percentages, with laboratory analysis of the products, and similar questions.

These courses will undoubtedly be of great interest and profit to nurses who can arrange to attend them this July and August. A full catalogue can be obtained by application to the university.

**COLUMBIA UNIVERSITY IN THE CITY OF NEW YORK—  
GENERAL STATEMENT**

The fifth Summer Session of Columbia University will open on Wednesday, July 6, 1904, and continue until Wednesday, August 17, inclusive.

Each course will consist of a minimum of thirty lectures or other exercises, or their equivalent in laboratory or field work.

**REQUIRED FEES.**

- |  |      |
|--|------|
| 1—Matriculation fee .....                                    | \$5  |
| This fee must be paid at the opening of the Summer Session.  |      |
| 2—Tuition fee (for one, two, or three courses) .....         | \$25 |
| Students at the Summer Session are limited to three courses. |      |

**COST.**

It is believed that the total expense involved in attendance upon the Summer Session, including tuition fee, but excluding railroad fare, may readily be kept below eighty dollars. In no event need it exceed one hundred dollars.

**BOARD AND LODGING.**

Whittier Hall, a university residence located at 1230 Amsterdam Avenue, between One-Hundred-and-Twentieth and One-Hundred-and-Twenty-first Streets, will be open for the accommodation of the students of the Summer Session.



A special rate of fifty dollars is made for the students of the Summer Session, from dinner on Tuesday, July 5, to breakfast on Thursday, August 18, inclusive. This rate is payable in advance and includes room, board, and laundry (one dozen plain pieces per week).

DEPARTMENT OF DOMESTIC SCIENCE.

s130—Food production and manufacture. Lectures, reading, and excursions. Professor VULTE.

1.30, Room 401, Teachers College.

This course covers the following special topics: cereals, preparation of meals, flours, and patented products; composition and use of leavening agents; bread, biscuit, and pastry; treatment of vegetables and fruits; jellies and preserves; oils and fatty bodies; water for drinking and detergent use, including mineral waters and non-alcoholic beverages.

This course will be continued in the Summer Session of 1905.

s140—Food principles. Lectures, reading, and laboratory work. Professor VULTE.

2.30-4.20, Room 401, Teachers College.

This is a course of instruction designed to present a study of the more important food principles, including sugars, starches, proteids, fats, mineral salts, special attention being given to the changes taking place during domestic manipulation and digestion; examination of water for domestic purposes.

Students are recommended to take the lectures in Chemistry as supplementary to this course.

Students who have had the equivalent of this course will be given the opportunity to pursue advanced studies in the chemistry of foods and stimulants in the laboratory.

Laboratory fee, five dollars.

This course will be continued in the Summer Session of 1905.

DEPARTMENT OF PHYSICAL EDUCATION.

s3—Personal hygiene and first aid to the injured. Lectures and practical work. Dr. MACCASTLINE.

11.30, gymnasium.

This course considers personal health as a problem in vital economics, the human body as an organic machine, and the aim of personal hygiene to be the provision of the most efficient body mechanism for the life-needs of the individual. The topics include the argument for the careful study of health and hygiene; ideals of health influencing different peoples; structure and functions of the human body; changes in the organism due to evolution and civilization and the health prob-

blems arising from these changes; conditions necessary to the perfect state of the body and the activity of the various functions; causes of weakness, injury, degeneration, and disease; improvement of health and prevention of disease by hygienic means; methods of first aid to the injured.

**813—Anthropometry, diagnosis, and corrective exercises.** Four lectures and two hours of practical work a week. Professor MEYLAN.  
8.30, gymnasium.

This course deals with the practical methods of studying the human organism; of determining its conditions and needs, and of applying the various measures indicated for normal development, improvement of health and strength, correction of deformities, prevention and cure of certain forms of disease. The course includes the following: Recording of personal and family history; measuring and testing the body; observation of organic conditions and physical signs; tabulation of statistics; use of graphic methods for representing bodily conditions and changes; individual prescription of exercise and hygienic regimen; corrective exercise for common deformities, such as round shoulders and spinal curvature; adaptation of movements for functional disorders and special nervous conditions. There will be practical work for all students.

#### DEPARTMENT OF CHEMISTRY.

**814—Chemistry of food and nutrition.** Five hours lectures a week with collateral reading, with or without laboratory work. Dr. SHERMAN.  
1.30, Room 511, Havemeyer.

This course preresquires a knowledge of elementary chemistry and includes: The composition of food materials; food analysis and the detection of adulterations; chemistry of the metabolic processes, functions of proteins, fats, and carbohydrates in nutrition; methods and results of digestion and metabolism experiments, including the analysis of physiological products; discussion of the nutritive value of staple and "prepared" foods; modification of cow's milk for infant feeding; metabolism of energy, methods and results of calorimeter experiments; calorific values and mutual replacing powers of the principal nutrients; food requirements under different conditions.

The laboratory work to be taken with this course can be varied, depending on the time and needs of the student, from none to a maximum of thirty hours a week. It may include: The quantitative analysis of food, water, oil, etc.; determinations of the heat of combustion by the bomb calorimeter; experiments in artificial digestion; modification of milk, including the analysis after modification, to compare the actual with the calculated percentages; analysis of physiological products, urine, etc. Any of the analyses included in Course 13 (see announcement of the School of Chemistry) may be made.

## CUBA: A SKETCH

By M. EUGÉNIE HIBBARD

"In the name of humanity, in the name of civilization, in behalf of the endangered American interests, which give us the right and duty to speak and act, *the war in Cuba must stop.*" In these words President McKinley outlined the necessity for intervention on the Island of Cuba in his message to Congress of April 11, 1898; and the joint resolution of Congress of April 20, 1898, authorizing the President to expel the Spanish forces from Cuba declared "that the United States hereby disclaims any disposition or intention to exercise sovereignty, jurisdiction, or control over said island, except for the pacification thereof, and asserts its determination, when that is accomplished, to leave the government and the control of the island to the people."

In the incredibly short space of four years all this had been accomplished. The Spanish forces had been withdrawn, the Republic of Cuba was established, and the island was handed over May 20, 1902, to the "government and control" of its own people. The history of nations will relate that when the flag of the new republic asserted itself, it rose from the troubled waters of distress, sickness, and oppression, and was unfurled in the clear, pure atmosphere of health, peace, and freedom, the visible sign of the redemption of a promise made by a nation in a war for humanity, not conquest. Results have proved so satisfactory (so far) that it is difficult to appreciate or realize the amount of work that was absolutely necessary to arrange preliminaries, to establish a form of government suitable for a people who for more than four centuries had been governed by oppression. Laws existed, adequate in the main, but never fairly or honestly administered; treatment was arbitrary and cruel, respecting neither life nor property; strict measures had to be enforced to check the demoralizing effect of ninety years spent in a struggle for independence, and means applied to relieve the conditions resulting—viz., starvation and disease.

This task was a difficult one, apart from the fact that the majority of the people were of the Latin race, with speech, customs, prejudices, and traditions unlike our own. Intensely suspicious, with the suspicion born of oppression and unfilled promises, creating but little faith in the great principles of government essential to the rule of law and maintenance of personal freedom, which now became obligatory for the United States to establish, and in so doing it was necessary to adopt such measures as would conform to existing conditions and even the prejudices of the people.



STREET IN HAWAII, LIGHTS AND SHADOWS OF TROPICAL CUBA



On December 13, 1898, the Division of Cuba was established, with headquarters at Havana. The division was placed under the control of Major-General John R. Brooke, and on January 1, 1899, the sovereignty of Spain was relinquished and the evacuation began, which was completed February 6, 1899, when the last of the Spanish army sailed away from the port of Cienfuegos (one hundred fires).

The bitter feeling that existed between the Spaniards who were left on the island and the Cubans was very apparent, but the removal of Spanish control and substitution of American rule was effected without disorder.

"The world-famous island of Cuba" lies about one hundred and thirty miles south of the United States off the coast of Florida; geographically speaking, she is a very near neighbor. It is the largest of the group of West Indian islands, and is also known as the Queen, Gem, or Pearl of the Antilles. It is in the Torrid Zone, shaped somewhat like a cornucopia, about seven hundred and fifty miles long, nearly the size of the State of Pennsylvania. The population of the island compares with that of the city of Chicago. It was discovered by Cristobal Colon (Christopher Columbus) in 1494, the Genoese navigator, who, under the auspices of Ferdinand and Isabel of Spain, made his first wonderful voyage of discovery in 1492, and claims to be his burial place, though the adjacent island of Santo Domingo, named after Bartholomew, brother of Columbus, avows that its most ancient cathedral, built in the early part of 1500, was the first receptacle of the ashes of the great navigator, who died May 26, 1506. The remains are alleged to have been transferred to Havana, Cuba, in 1795, and more recently from Havana to Spain.

In the city of Havana, facing the Governor's palace, now the residence of the Chief Executive (President Palma), is a small chapel, built of white marble, surrounded by a high iron railing and partially shaded by trees, erected on the spot where, tradition avers, Columbus on landing offered a mass of thanksgiving. This chapel is open to the public one day only during the year, the day being *Viernes Santo* (Good Friday).

Many tribes of peaceful Indians were found on the island by the early explorers, numbering in all perhaps a million people. In the city of Havana may still be found the remains of an old stone wall with enclosures, which is said to have at one time surrounded the city, and was built as a fortification against the Indians. During the first century of Spanish rule these people disappeared, the people in whose conversion Queen Isabel was so interested; others who were imported lived and died only in slavery. Near the town of Matanzas is a beautiful and



fertile valley known as the Yumuri Valley (a corruption of the Spanish *Yo Mori, I die*), so named by the early settlers, it being the place of refuge of the Indians in that section of the country, who, when requested by the Spaniards to leave the valley, gave the short and decisive reply, "We die first." The Yumuri River, the valley itself, and the hills surrounding it, from which an extensive view is obtained, is one of the spots in Cuba to be ever remembered for its natural beauty and tradition.

Following the disappearance of the Indian the importation of negroes from the West Coast of Africa began. The state of slavery continued for many years. The emancipation of slaves was finally secured and the treaty signed by Spain and England in 1835.

The population in 1898 was composed of Spaniards and Cubans, who constituted the white race, the Africans, who formed fully one-third of the population, and the Chinese coolies and laborers from the West Indies, who formed the mixed races. The Africans identified themselves with the Cubans in the war for independence and were a strong factor in the persistence of the struggle.

The Spaniard, *señor*, *don*, or *grande*, appears as a most imposing person. He was the representative or lieutenant of Madrid, Spain, as none but native-born Spaniards were eligible for office, endowed with extraordinary powers, intent only on the plunder of office, or he was a man of a commercial turn of mind, residing long enough on the island to amass a fortune—an average term of three years accomplishing the purpose—sufficient to repair some ancient alcazar or castle in Spain, or to purchase some desirable estate where he in turn might live a life of imposing grandeur. Being prompted by these motives, or fulfilling his mission of supremacy, he was naturally devoid of sympathy or fine sentiments, a man of adventurous disposition (who with qualifying attributes might be admired), audacious, and tyrannical, dominated by the idea that Spain held the military, religious, and commercial control, and that Cuba was legitimate prey.

The dungeons of the Morro Castles, the dead line at Cabaña, the students' monument in the Cristobal Colon Cemetery, are standing though voiceless monuments of cruelties practiced within the memory of the present generation. The childless widows and orphans are the living witnesses. The exception is found in the Spaniards who have elected to remain and share the destiny of the new republic by becoming citizens, men whose characters and business abilities will prove a large factor in raising from the ashes a substantial and we hope an enduring testimony of gratitude to Liberty. The well-known courtesy and unexcelled hospitality of the Spaniard characterizes the *señor* in Cuba as in Spain.



THE YUMURI RIVER NEAR MATANZAS



GROUP OF NATIVES AT WELL, PINAR DEL RIO, CUBA

The Cuban, the descendant of the Spaniard, who for generations had lived under the despotic and arbitrary rule exercised over a people in a state of rebellion, imbibed from earliest childhood a spirit of opposition to controlling influences and a detestation of authority. As reasons continually presented themselves for resenting the oppressors' rule, he too counted his life honorably sacrificed if forfeited in fighting for the liberation of his country, "for none hated Spanish rule more intensely than those of Spanish blood born on Cuban soil." The Cuban now forms the largest part of the white population. According to the Constitution of the Republic of Cuba "Africans who may have been slaves in Cuba and those who were emancipated and comprised in Article 13 of the treaty of June 28, 1835, entered into by Spain and England," are entitled to become citizens and compose a large part of the Cuban people of to-day.

The Chinese coolie was and is the market gardener, the fruit-vender, cook, and even housemaid of the people; his labor from preference is that of gardener, and he remains an alien. At the close of the war, greatly to the benefit of all concerned, strangely enough, a steady stream of immigration set in from the North of Spain, composed of the hardy working classes from the agricultural districts, who do not look upon work as a humiliation, of most frugal habits and saving propensities, industrious, patient, and willing, the element so desirable and absolutely necessary where the native population was demoralized by years of industrial inactivity, the uncertainty of the future, and the enervation of mind and body the result of starvation and disease.

Early in the year 1899 the civil government was divided into four departments, those of "State and Government," "Finance," "Justice and Public Instruction," and "Agriculture, Commerce, Industries, and Public Works." These were later increased to six, one of which was the Department of Charities.

The first duty of the Government was the immediate relief of distress, the sanitation of the towns, and the revival of industry. Through the agency of the officers of the army (without reference to the large amount of relief distributed by the Red Cross Society) food was issued at a total cost of one million five hundred thousand dollars. In the two provinces of Matanzas and Santa Clara thirty-six thousand widows and fifty-eight thousand orphans were fed, sheltered, and clothed, medicines were supplied, and the sick attended to. The cities and towns were crowded with refugees and reconcentrados.\* The latter were the natives living in the country and in isolated districts, non-combatants who were ordered to the towns and cities and escorted there by the

\* A feature of this war enforced by General Weyler.

Spanish troops at the point of the bayonet, ostensibly to secure the safety of the women and children and to prevent the harboring of a hostile element. The tales of sadness, re-told many months later, showed but little lessening of the feeling of exasperation caused by the separation, subsequent starvation, and death of families and friends and by the forced abandonment of homes and farms, which had been ruthlessly laid waste. The capacity of the cities was overcharged, and destitutes in a most deplorable state of abjectness were found huddled together in huts, hovels, and underground vaults, the living with the dead, striving to secure protection from the elements, too weak to emerge to seek the food nature demanded. It has been estimated that over four hundred thousand reconcentrados died of starvation before the United States interposed. Havana suffered more than the other cities in Cuba, as it was the principal one. One of its finest streets is now built over a portion of the town on the site of one of the worst catacomb-like places of concealment.

The sanitary—or rather unsanitary—condition of the towns is difficult to conceive. The streets had been the receptacles for all the refuse, garbage, and other filth, it is said, for centuries. In some places it was necessary to dig down several feet to reach the original paving. The modern methods of sanitation were unknown, cesspools long neglected existed, the water supply was inefficient and in many places was the sources of much of the sickness that prevailed, and the air was contaminated by the foul odors arising from the decomposing material lying exposed to the sun and the rain. The birds of carrion, the scavengers of the island, were numerous, and filled the air with the sound of their harsh, repulsive croak. It was interesting to watch the rapid decrease in their number as the country was being rid of the material on which they existed.

The Queen, the Gem, the Pearl of the Antilles, whose shores were laved on every side by the beautiful blue waters of the Caribbean Sea, seemed to implore the cleansing influence of the tide, but which in answer appeared only to mock by creeping its few allotted inches inshore. The tide does not rise more than a foot. The sound of the surf is only heard when the wind is high.

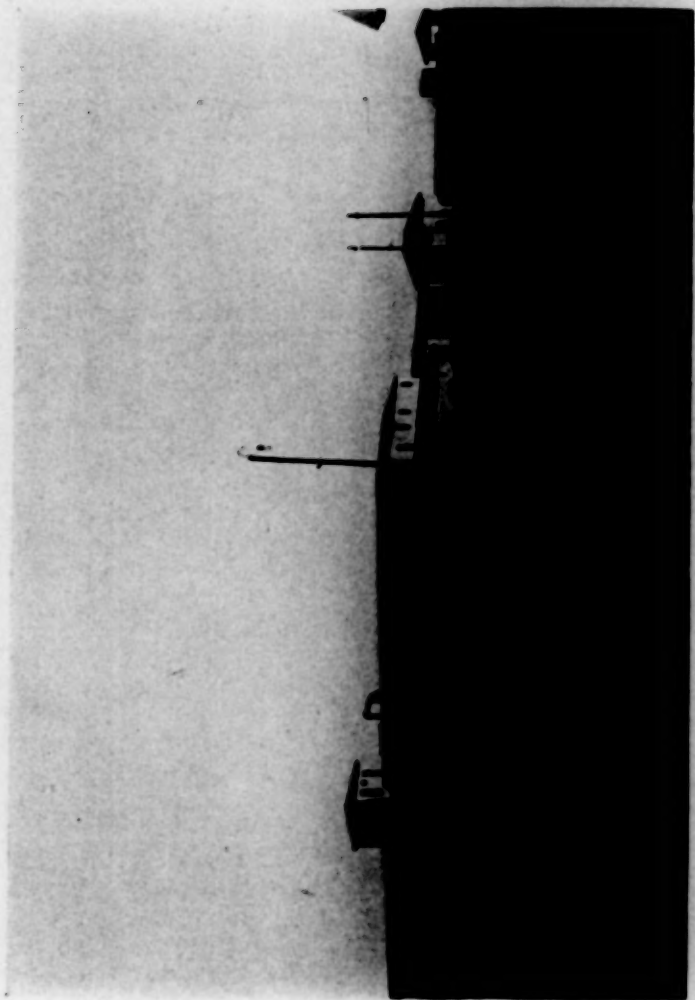
Many deaths occurred during the first few months of 1899, owing to the great number of sick and dying remaining at the time of the Spanish evacuation. "The rate steadily decreased, until in September it was brought down to the annual rate of twenty-seven per thousand, and in October to 26.6 per thousand."

Yellow fever, the scourge of the island, which caused it to be a menace to our southern ports during a greater part of the year,

GATHERING SUGAR-CANE WITH OR-TEAM, CUBA







PRESS AND MILL ON SUGAR PLANTATION

attacking principally those of foreign birth resident but a short time on the island (a peculiar feature is that the natives are immune), was decreasing. The number of deaths from this disease in Havana for the first ten months of the year 1899 was sixty-three, compared to one hundred and thirty-four in 1898.

The industry of Cuba, which is mainly agricultural, had been so long neglected that in order to revive it it was necessary, in restoring the homes and property that had been wilfully destroyed by the Spanish troops,—though it has been asserted that the Cuban attached to his home would from sheer emotion destroy all semblance of comfort or prosperity before leaving it rather than have it fall into the hands of the enemy,—to furnish equipment and to restock the farms. Oxen were purchased, the slow, deliberate movements of the creatures suiting well the requirements for ploughing and heavy hauling purposes, seeds were supplied, and agricultural implements provided.

The sugar plantations were heavily mortgaged, which affected the owners of the large estates, and under the rather uncertain conditions made loans hazardous; thus crippled, the employment of the native, who depended upon the work on the plantations and in the sugar mills for his daily wage, was precarious.

The conduct of the Cubans during the first year of deliverance has been cited as "admirable." The agitators, who are always in evidence, criticised the action of the United States in assuming control of the country. The official report, however, states, "The substantial body of educated Cubans have shown themselves to be patriotic, appreciative, and helpful, while the great body of uneducated Cubans have been patient and law-abiding."

In 1900 Brigadier-General Leonard Wood (now Major-General), the commander of the Department of Santiago until December, 1899, became Military Governor of the island.

The census completed this year showed a total population of one million five hundred and seventy-two thousand seven hundred and ninety-seven, of whom thirty-four per cent. could read and write, sixty-six per cent. being illiterate. More than half the population consisted of native-born whites.

The standard of education in the schools had never risen above the primitive method of learning by rote, the principal text-book being the catechism, and the girls were taught embroidery. Scholars attended the homes of the teachers, as there were no separate school-houses, and the necessary accessories in the line of maps, black-boards, or other facilities were lacking. The attendance was governed by the ability of the parents of the pupils to contribute a fee; the children of the very poor were

therefore neglected, and during the war the schools were practically closed.

The daughters of the wealthy families attended the convents or were educated abroad, and the sons who intended following a profession or commercial life were educated, according to choice, at Madrid, Paris, Barcelona, or in the United States. These men retained through several years' residence abroad true patriotic instincts, which finally, thus disseminated, attracted the attention of the world in their prolonged endeavors to liberate their country from the oppressors' rule.

Regarding education, steps were immediately taken to remedy the state of affairs, the question being one of general interest. With the assistance of Mr. Alexis Frye, a system of education was inaugurated under the Cuban Secretary of Public Instruction and the Commissioner of Public Schools, American text-books were translated into Spanish, kindergartens were established, Spanish cuartels (barracks), after being thoroughly cleansed and renovated, were utilized as school buildings. A fund provided through the generosity of Harvard University and its friends enabled over one thousand Cuban teachers to attend the summer school at Cambridge, Mass., the United States Government placing five transports at their service to convey them from and back to Cuba.

Investigation of the public institutions proved them to be in a most dilapidated and squalid condition. The prisons were found filled to overflowing, "the wretched creatures living in indescribable filth and squalor." The women slept on the floor, and at the time of the official visit were unable to appear in a body, as only one garment was provided, which had to be passed from one to another. Many of those poor creatures had been confined for eleven years, and in some cases without having been convicted of any offence and ignorant of having committed any misdemeanor. On the recommendation of the board five hundred and twenty prisoners were released and action taken to inaugurate a system savoring of civilization. The changes instituted in the courts, etc., soon resulted in many of the prisons being unoccupied. In Matanzas the Cárcel (prison) was metamorphosed and became a high school, with beautiful and commodious rooms, some of which were used as a kindergarten. A radical change was thus effected.

(To be continued.)



## BOOK REVIEWS

IN CHARGE OF  
M. E. CAMERON



**A MANUAL OF FEVER NURSING.** By Reynold Webb Wilcox, M.A., M.D., LL.D., professor of medicine in the New York Post-Graduate Medical School and Hospital; consulting physician to the Nassau Hospital; visiting physician to St. Mark's Hospital; fellow of the Academy of Medicine; member of the American Therapeutic Society, etc. P. Blakiston & Sons, publishers, Philadelphia.

A year's class teaching in the form of lectures to the nurses of St. Mark's Hospital, New York City, during the season of 1903-1904 makes an admirable addition to the literature on fever nursing. The subject does not allow of very much that is new or original, yet there is every season some degree of change in the treatment, and one needs too to know the practice which is most general, and this we can best learn by observing each different hospital's methods. The "Widal Reaction" seen on all typhoid charts to-day needs to be explained to the nurse who has been away from her hospital and training-school for a few years, especially if she has been nursing in the country. It is small points like this that make it necessary for a nurse to keep constantly reading. The lack of knowing does not prevent her from being a good nurse, but she is mortified to be found ignorant, and it pays to keep well posted.

The first four chapters treat of fever in general. The temperature on all charts throughout the book is given both in Fahrenheit and in Centigrade, and in one of the earlier chapters there is a comparison of the three scales of thermometry—Fahrenheit, Centigrade, and Reaumur—with the rule for changing Fahrenheit reading into Centigrade. The first two chapters make a thorough survey of fever in general, and the third brings us to the treatment which falls mostly into the nurse's hands: the various baths, packs, compresses, enemata; the care of the mouth; relieving of distention from gas in the intestines; the treatment of symptoms referable to the circulatory and respiratory systems, of the urinary system, of the nervous system, and of the organs of special sense.

The feeding in febrile diseases and the diet for the convalescent are appropriately considered, with tempting menus for the latter, and the subject of fever in general winds up in the fourth chapter with rules for disinfecting, the choice and furniture of the patient's room and the care of the same; and under the heading "The Patient," in this chapter, is given some general instruction, and then the following: "Usually the physician will call at the same time each day, and when method is the watchword of the sick-room the nurse will always be prepared for his entrance either at the regular hour or any other. Nothing is more disturbing to the entire scheme of sick-room administration than a visit from the medical attendant when the nurse is unprepared for the event. The nurse should rise at his entrance, if not already standing, and accompany him in his inspection of the apartment and patient. She should maintain a discreet silence, speaking only in response to questions at the close of the visit; if there be any-

thing not down upon the chart which she wishes elucidated, she may make the report or the necessary inquiries. She must note the physician's orders upon a bit of paper; on no account may she trust to her memory," etc., etc. If there exist nurses to whom such instructions are necessary, why do doctors employ them? No nurse would take a second case for a doctor whom she had found it necessary to instruct to remove his hat in the sick-room! Chapter V., the fevers classed as of the continued type; Chapter VI., the same, with local manifestations; Chapters VII. and VIII., intermittent type and the exanthemata, the concluding chapter on thermic fever. The book is of convenient size, interesting enough to keep the night nurse wide awake, and just the thing for one to brush up one's memory with and keep one in touch with the times!

**FOOD AND COOKERY FOR THE SICK AND CONVALESCENT.** By Fannie Merritt Farmer, principal of Miss Farmer's School of Cookery, and author of "The Boston Cooking-School Cook-Book" and "Chafing-Dish Possibilities." Brown, Little & Co., publishers, Boston.

*"Invalid cookery should form the basis of every trained nurse's education."*

*"A good sick cook will save the digestion half its work."*—FLORENCE NIGHTINGALE.

*"The careful preparation of food is now recognized to be of vital importance to an invalid and a valuable assistance, in many cases, to the physician in hastening the recovery of a patient."*—HELENA V. SACHSE.

We do not, in this country, begin a nurse's education with class and kitchen teaching in invalid cookery, but no nurse goes out of her training-school in these days without having passed her examination in this, as well as the other branches in which she has been taught. In ordinary cooking we generally find that a cook has to be made as well as born; and this rule holds doubly good in invalid cooking, where the actual value of every ounce of food consumed by a patient must be noted. A good cook always values a good cook-book. Miss Farmer's book has one feature which makes it different from others of its class, in making the recipes for the most part individual, and in many instances adding a note of the caloric value. Some time ago a correspondent wrote the Editor of the *JOURNAL* asking for the name of some book, not too bulky, and "containing all the diseases, with the proper diet for each, and recipes;" if Miss Farmer's book had been out at that time it would certainly have come nearer to filling the bill than any that were recommended, although it does not profess to meet the requirements of the querist.

Miss Farmer knows her physiology as well as the best nurse of us all, as no one can doubt who reads her book carefully. This is particularly apparent in Chapter I., "Food and its Relation to the Body;" Chapter III., on "Digestion;" Chapter IV., "Food and Health vs. Drugs and Disease," and Chapter XXX., "Diet in Special Diseases." Not that there is any teaching of physiology; on the contrary, it is assumed that the nurse already knows all she should know, and "The nurse should be a student of the classification of foods, their fuel value and digestibility, thus being able to determine and regulate the needed rations for her patients. Chapter II., "Estimates of Food Values," with its table of caloric value of some important foods, is very interesting and very convenient for reference in arranging menus so that money shall be spent for food to the best possible advantage.

There is an especial chapter, XXIX., on "Diabetes," and a list of recipes of



nearly a hundred dishes which may be served to this class of very narrowly restricted patients. Here too we have a list of the diabetic flours commonly in use. Ten are given with the percentage of starch to each, but only one of the ten is recommended as being practically free from starch, "Barker's Gluten," a fact worth remembering. There are general directions for the diet in some special medical cases, some formulae for increasing the body-weight, and some advice for those who suffer from obesity. The chapters on infant feeding and the feeding of children from infancy up to the fifteenth year are valuable and should have a special word of commendation, especially the table showing increase of calories required for a growing child, with the calories divided showing exactly how much of each class is requisite—viz., proteid, fat, and carbohydrates.

The illustrations are very pretty and dainty, and calculated to provoke the most indifferent to a good appetite, and give many hints for attractive serving. The book is sure to become a very popular one both for teaching and reference.



**INFANTILE COLIC.**—The *Journal of the American Medical Association* in a synopsis of an article in *Pediatrics* says: "The dangers of the rubber nipple, especially those with a long tube, are emphasized by McAllister, who would never use any nipple continuously over two weeks. He insists on having two, one being kept in an alkaline cleansing wash while the other is being used. The dangers of too rapid feeding are pointed out, and he remarks on the necessity of careful physical examination as to the cause of the colic. In the treatment too careful circumspection in the use of drugs cannot be practised. Many cases can be permanently relieved by a little manipulation with or without gentle massage of the abdomen. Next to this is warmth applied to the abdomen, dry or moist, or internally in the form of sips of hot water or hot enemas. In spite of all efforts, however, some infants require medication with carminatives. In these cases the standard teas frequently prove too weak. Paregoric with opium excluded is a remedy of considerable value. The dose is easily regulated, beginning with a few drops. He quotes Rotch as advising the use of carminatives between feedings and gives one of his favorite prescriptions. It consists of forty grains of sodium bicarbonate, forty minims of aromatic spirits of ammonia, thirty minims of glycerin, and two ounces of peppermint-water. One teaspoonful to be given between feedings. When acidity is not an element requiring special treatment, *sansfuitida* is frequently of value. The use of narcotics is only exceptionally permissible."

**THE KOPLIK SPOTS.**—The *New York and Philadelphia Medical Journal* in a synopsis of an article in a German contemporary says: "Ruedel confirms the diagnostic value of the Koplik spots as an early sign of measles. He had occasion to observe an epidemic; in the majority of the cases the exanthem appeared upon the inside of the cheek and upon the soft palate for some days before the appearance of the cutaneous eruption. In cases of rubella no mucous eruption was observed, while in scarlet-fever patients such an eruption was noticed without the characteristic whitish spots, and consisting of many minute red dots, the edges of which were scarcely distinguishable from the surrounding mucosa."



## NOTES FROM THE MEDICAL PRESS

IN CHARGE OF  
ELIZABETH ROBINSON SCOVIL



**THE SITZ BATH.**—A. Zimmern has a paper in the *Processe Medicale* on the value of the sitz bath, which he highly recommends. He says the effect depends on the temperature at which it is given and the length of time it is continued. The tepid bath is an excellent general sedative. The cold may be used for the relief of constipation, neurasthenia, and incontinence of urine among other conditions, in chronic inflammation of the uterus and its appendages, and in insomnia. If it is prolonged, it is of use in chronic diarrhoea, leucorrhoea, and hæmorrhoids. The hot sitz bath is an emmenagogue and relieves painful menstruation. The water should reach the navel as the patient sits in the bath, and the body should be covered and the feet protected.

**SERUM TREATMENT OF SMALLPOX.**—Alfred C. Smith reports in the *Medical Record* the treatment of six cases of smallpox with antistreptococci serum. He claims that it shortened the duration of the disease, the secondary fever was absent, no pus formed, so there was none to be absorbed, pitting was prevented, there was less suffering and weakness, less danger of the lungs and kidneys being involved, and more rapid convalescence.

**SEA VOYAGES.**—The *New York and Philadelphia Medical Journal* quoting from the *British Medical Journal* says: "Westcott states that as a tonic, a restorative, and a sedative for brain-fagged people a sea-voyage may do wonders. For consumptives in whom the lesion is slight or latent, a voyage to South Africa is often excellent, but not for those in whom the disease is active. Cases of nervous disease, angina pectoris, exophthalmic goitre, or chronic bronchitis should never be sent to sea. For sea-sickness he advises that the patient be brought under treatment several days before sailing, attending to the action of the bowels, remedying any dyspeptic conditions, and administering sedatives, such as ammonium bromide. Hypnotic suggestion is often of great value."

**EARLY DIAGNOSIS OF TUBERCULOSIS.**—James J. Walsh in a paper in the *Medical News* states that as tuberculosis in its early stages is easily curable, an early diagnosis is most important. In the late stages it is almost beyond medical control, so that its immediate recognition is imperative in the interest of the patient. He suggests as means to a positive diagnosis the observation of the following symptoms: Rapid pulse, a daily variation of temperature of over 1.5° F., persistent cough, loss of flesh, and localized areas in the lungs when prolonged, slightly roughened expiration can be detected. More definite symptoms can only be observed when the disease is in the well-advanced stages.

**NORMAL LABOR.**—A. M. Pond in an article in the *Medical News* gives some good advice to doctors which is equally useful for nurses: "1. Success in

obstetrics depends wholly upon your ability to secure and retain surgical cleanliness. 2. The same infective agents encountered in surgical practice are the causative agents in producing puerperal complications, and are only successfully combated by the employment of stringent aseptic and antiseptic technics. 3. Refrain from making numerous vaginal examinations, and when done, take great aseptic care. 4. Do not wait until you are called to the case to make the preparations for confinement. 5. The practice of carrying a confinement pad is dangerous. 6. Sunshine in itself is a valuable germicide; do not exclude it. 7. Unless the vaginal discharge is known to contain pyogenic bacteria the douche is contraindicated. 8. Exert the same surgical technics in dressing the umbilicus that would be demanded in any other fresh wound. 9. Be clean and be sure that you are clean; take no chances. By so doing you will reap a liberal temporal reward, besides having the serene satisfaction of knowing that you are serving humanity faithfully and well."

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"CORSET CANCER."—The *New York and Philadelphia Medical Journal* in a synopsis of a paper in the *Lancet* says: "Lucas calls attention to a mode of onset of cancer of the breast which he calls 'corset cancer.' The site where this carcinoma attacks the skin and cellular tissue is over an upper and outer radiant from the nipple corresponding exactly to the point where the upper edge of a corset crosses the pectoralis muscle. It occurred on the right side in the three cases seen by the author, probably due to an undue use of the right arm, the friction of the corset at this spot being the cause of the cancerous process."

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PREVENTION OF BLINDNESS AT BIRTH.—The *Boston Medical and Surgical Journal* says: "The Massachusetts Association for Promoting the Interests of the Adult Blind has published a leaflet on the prevention of blindness at birth, giving directions for treatment which may be carried out by the laity. The leaflet calls attention to the fact that inflammation of the eyes in new-born infants is a contagious disease which must be treated early and vigorously under a doctor's direction, and the statement is made that in England about thirty per cent. of pupils in the schools for the blind lost their sight through neglect or wrong treatment of the disease."

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CHLOROFORM ANÆSTHESIA.—Emil King in reporting in *American Medicine* two cases of recovery after apparent death in chloroform anesthesia draws the following conclusions: 1. Deep anesthesia is always a condition of danger. Therefore every precaution must be taken to guard against danger. 2. When serious accident occurs we must have ready a well-matured plan of treatment which meets the indication in the best possible manner. 3. Death usually resulting from failure of the vital centres, the first indication is their stimulation. Artificial respiration, tongue traction, and heart compression should be first tried. The application of cold, ether being poured on the abdomen according to Hare, inversion, suspension and succussion, dilatation of the sphincter ani, and electricity are worthy of trial if the others fail. 4. Hypodermic injections during the stage of collapse are a waste of time. The arterial pressure being nil, there can be no effect from medication unless the injection be into the heart. They may do much good before cardiac arrest or after the contractions are resumed, and then the remedies of value are limited to a few. 5. Injections

of ether and alcohol in any form are apt to be harmful. Their effect in overdoses is so similar to chloroform in their action on the vital centres that we only add to the danger by their use. 6. Mechanical efforts at resuscitation must not be so rough that internal organs are injured. That this is possible is proved by reported cases where the liver was torn, blood found in the pleura, and the tongue wounded. 7. Since we cannot know when the molecular changes separating true from seeming death take place, our efforts at resuscitation should continue for at least one hour.

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A NEW TREATMENT FOR THE MORPHINE HABIT.—Dr. William S. Birge has an interesting paper on this subject in the *Boston Medical and Surgical Journal*. The treatment he advocates has been successfully used at a private institution in one of the Southern States and must, of course, be carried out under the supervision of a physician. A patient who was taking twenty grains of morphine and five grains of cocaine daily was cured in one week without suffering. A dose of ten grains of calomel is given at bedtime, followed in the morning by a full dose of epsom salts. If the bowels are not thoroughly moved, five grains of calomel are given the second night and the dose of salts repeated. A Turkish bath is given every second day during this preparatory treatment. The morphine is not discontinued until the active treatment begins, which lasts for seventy-two hours. The usual dose is taken until noon of that day, when it is discontinued permanently. At two o'clock five drops of a specially prepared solution of mandragorin are given hypodermically with one-eighth of a grain of pilocarpine. This dose is repeated every two hours. If discomfort is felt from lack of the morphine, the dose of mandragorin is increased to fifteen or twenty drops until comfort ensues. After the patient perspires freely only enough pilocarpine is given to keep the skin moist. Usually as long as the patient perspires he is perfectly comfortable. One-twentieth grain of strychnine and one-eighth grain of sparteine are added to the hypodermic during the second day if the heart shows any sign of weakness. Half a grain of codeine or one-fourth grain of morphine may be given if there is extreme restlessness. At the end of forty-eight hours the antidotal and eliminative effect of the remedies are usually complete and there is not a vestige of morphine left in the system. Light food should be given at regular intervals. After the active treatment is over hot and cold shower-baths are given, strychnia and sparteine are used for three or four days, and a nerve tonic and sedative for several weeks. The treatment should be carried out in a hospital or sanatorium.

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CHRONIC TONSILLITIS.—G. D. Murray in the *Laryngoscope* lays stress on the following points: The teeth should receive attention from infancy, also that the tongue when coated should be cleaned as carefully as the teeth. The mouth is a primary cause of tonsillitis and ought to receive simultaneous treatment with the throat. Offensive breath, from micro-organisms present in the mouth and throat, can be eliminated through the personal effort of the patient. Bad taste in the mouth, particularly before meals, suggests infection of the tonsils, decomposing epithelium debris on the tongue, gums, teeth, and oropharynx—one or all. This filth (in which Sternberg found forty-two different varieties of micro-organisms) ought to be cleaned and sterilized several times daily by the patient. Diseased tonsils, not necessarily enlarged, and often hidden, no longer act as a barrier to disease, but rather as a germ incubator and ought to be removed.

## HOSPITAL AND TRAINING-SCHOOL ITEMS



### HOSPITALS

Mrs. MOUNSKY, a Toronto General graduate who recently took charge of the Swan River Hospital, Northwest Territory, writes thus of the opening of the hospital:

"The Ladies' Aid Society asked all invited guests to bring with them non-perishable provisions to the value of twenty-five cents each. Next day the hospital reminded one of a well-stocked meat market and grocery combined. We felt quite satisfied that some time would elapse before we were reduced to starvation. The reception, or 'at home,' was conducted in the usual way, Miss Fyfe and myself remaining with the president at the door to be introduced to the guests. Many of the country people brought their babies and spent the day with us, and although the day was very stormy, a large number came. The hospital is prettily situated on a high bank overlooking the Swan River. The older residents anticipate very high water this year on account of the unusual amount of snow and ice. The mud is of the black, sticky kind, and takes a long time to dry. We can accommodate ten patients and expect before long to have everything complete and a pretty home as well as hospital."

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### SOME WAYS IN WHICH HOSPITALS ARE BEING AIDED

Mrs. MAUDE M. JACKSON, for the Iroquois Memorial Association, has begun the organization of children's clubs which will gather funds for the proposed emergency hospital in the downtown district. Already two clubs have been formed. Mrs. Jackson has an office at 900 Calumet Building, 188 LaSalle Street, Chicago, Ill.

AN entertainment was given in Arion Hall, Rockaway Beach, L. I., for the benefit of the fund to establish an emergency hospital. A fairy play, "Snow White," a dramatization of the German fairy tale, "Schneewichen," written expressly for the occasion, was presented by seventy-five children.

THE Delaware and Hudson Railroad Company has contributed two thousand five hundred dollars to the fund for the erection of a hospital at Plattsburg, N. Y. This is to be used to endow a bed to be known as the Delaware and Hudson bed. The institution will be known as the Plattsburg City Hospital.

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### TRAINING-SCHOOL NOTES

At the urgent request of the Maryland Commission for the State Exhibit at the St. Louis Exposition the Johns Hopkins Hospital Training-School has undertaken to prepare and send an exhibit showing something of the work of the Training-School. Owing to the late hour at which the work was undertaken, and the great amount of work involved in getting up such an exhibit, it will not be possible to present everything in the most complete and desirable manner, and allowances must be made for the finish and detail of work put through in

great haste in a few weeks which really requires the careful, elaborate effort and thought of months.

Space has been allotted in the Educational Building, and stress is laid upon those features which show methods of training and instruction.

The exhibit comprises series of photographs taken in various parts of the hospital, showing the several classes engaged in bandaging, in dissecting and using the microscope, in the study of anatomy and physiology, in the study and analysis of specimens in the clinical laboratory, in demonstrations of methods of practical nursing, in preparation of drugs in the pharmacy, and in the preparation of broths, desserts, modified milk, etc., in the diet kitchen.

There are also full-size models of nursing appliances, such as nightingales, extension stockings and binders, framed, together with photographs of the same articles in use by patients in the wards, and in several instances a corresponding stocking or binder of diminutive size is to be seen applied to a small model, giving a clearer idea of its details than might otherwise be obtained.

Miniature models of a croup tent, sweat-bath, inhalation tent, back-rest, typhoid and continuous baths, are set up as though in operation, demonstrating the methods here employed for such forms of nursing.

A small corner given over to tuberculous nursing shows the equipment of the visiting nurse of the Johns Hopkins tuberculosis clinic, with basket, charts, records, and reports, and it also shows a tent suitable for the out-of-door treatment of these patients containing the necessary furniture and a small model properly attired to benefit by this treatment. Specimens of other charts, temperature sheets, bedside records, and the several baskets in use throughout the wards for making dressings and holding necessary toilet articles, as well as the baskets carried by the visiting orthopedic and outside obstetrical nurses, are demonstrated with the full complement of appliances.

A miniature operating-room contains a patient prepared for operation, with all the tables and dressings in readiness, from the solutions for cleaning up the doctor's hands, through the various stages to an infusion apparatus ready for use. Samples of the dressings used in the operating-rooms and wards are done up in packages of the usual size and are arranged adjacent to the operating-room.

From these demonstrations, together with numerous views of the hospital and interiors of the store-rooms, laboratories, students' sleeping-apartments, lecture- and class-rooms, it is hoped that a fair idea of the opportunities offered for nurses' instruction as well as some of the results of this training may be gained.

THE graduating exercises of the St. Camillus Training-School, Kalamazoo, Mich., under the charge of the Sisters of St. Joseph, were held April 20. The following is an extract from an essay read by one of the graduating class, entitled "All Attainments are the Result of Effort:"

"Nursing is an art, requiring as earnest preparation as that of any sculptor or painter, for what is the having to do with canvas or marble compared with the living body, the temple of God?

"A nurse must have higher motives and higher ideas; she must concentrate her thoughts upon the thing she is doing. It does not do to be absent-minded, we must be exact and thorough, there must be no if's. Frequently we have only one chance, and there must be absolutely no mistake. Faithful, conscientious, intelligent work alone will bring us success. The secret of ultimate success lies not only in our skill, but in our faithful application to duty.



"Tact is one of the rarest gifts of God, and is very important to the nurse; it is that which helps to meet emergencies, to soothe the sick, to calm the anxious and alarmed friends, who are often more difficult to manage than the patient. A nurse cannot too soon convince herself that she must have all her faculties under perfect control, and must possess in an eminent degree that calm dignity so essential. The nurse must remember that she is the connecting-link between the physician and the patient, responsible to the one and for the other.

"Nursing trains the eye and the hand and, we may say, the heart also, for who could be brought in contact with suffering creatures without that divine precept entering the heart, 'Love one another'? The nurse is called to minister to all sorts of characters, refined, rough, capricious, ungrateful, good and bad, and must see in all God's image. For the time being she must make herself the guardian and friend of each, never losing sight of her responsibility of doing good. She must preserve serenity of countenance, sweetness of manners and voice, which are sunshine in a sick-room. She must guard against discouragement in painful circumstances. The charity which animates her must emanate from the heart of God. Like our Divine Lord, she goes about doing good to suffering humanity, as a cup of cold water given in God's name is not to go unrewarded. What a glorious testimony will her life's labor call forth on the day of eternal reward if she is true to her calling! therefore she must love her neighbor in and for God. This should be the keynote of duty for her. Small acts of thoughtful kindness often bring sweet recompense of gratitude. A nurse should be a quick observer and of a sympathetic yet not too susceptible nature. It is a noble career, but hardships must be endured and obstacles overcome. There is no work in which faithfulness in little things has larger results than in nursing. May our pilgrimage here be a symphony, whose harmonies, while blessing our life on this earth, will surge onward and ring out yet clearer and more beautiful unto the life eternal. May our good Lord help us realize our highest aims, and may He give us abundantly of His graces, that we may do His work while we live, and be greeted when our labor is over with the words, 'Well done, good and faithful servant, enter into eternal joy.'"

ST. LUKE'S HOSPITAL of Jacksonville, Fla., graduated a class of five nurses May 4, the occasion being the first public exercises of the kind held since the Training-School was organized in 1893. The superintendent, Miss Fetting, gave an address, in which the following remarks to the public show that the school is working towards the best professional standards:

"It is not necessary to dwell upon those who have deserted the ranks or those who lacked the requisites of a good nurse. But I cannot refrain from sounding a warning note to the public. When employing a graduate nurse, a stranger to you and your physician, require her to show her diploma. And we would caution the public against receiving women who profess to have left the school. 'Leaving' implies that they have been found unfit at the close of the two months of probation, or that they have broken their contract to remain in the school for the course of training, or that they have been dismissed for inefficiency or misconduct. If for any reason a pupil leaves the school with the approbation of the committee, she will, if she wishes it, receive a written discharge. This is to you and to us a very serious matter, and proper precautions should be taken to protect the public, our hospital, and graduates from other schools."

The graduating class consisted of five young ladies: Miss Beatrice Daniel,



Misses Eulalie Henry and Olive Kea Henry, Miss Hermina Johnson, and Miss Isadora M. Roof. As Miss Roof had been called home by illness in the family, and could not be present at the exercises, a pupil nurse acted as her proxy.

THE graduating exercises of the Training-School of the Presbyterian Hospital in Philadelphia were held on Tuesday, May 3, at eight o'clock P.M., in the Princeton Presbyterian Church. Rev. J. Addison Henry, D.D., and Dr. William E. Hughes addressed the graduating class. Rev. Charles A. Dickey, D.D., presented the diplomas and badges to the members of the class. Miss M. Katherine Thatcher was awarded the Jessie Miller Ward prize for the highest average of marks. A reception, which was largely attended, was held in the Nurses' Home after the exercises. The graduates were Miss Anna E. Abele, Mrs. Maude G. Barnes, Miss Mary B. Beattie, Miss M. Louise Beatty, Miss Beatrice Blackstock, Miss Agnes C. Browne, Miss Mary B. Cameron, Miss Mildred Clark, Miss Beatrice E. Connelly, Miss Ethel Fisher, Miss D. Elizabeth Johnson, Miss Willow Jordan, Miss Mabel A. Metzler, Miss Sophia D. Rees, Miss Julia F. Sharpless, Miss M. Katherine Thatcher, Miss Myrtle M. Weaver, and Miss Mary N. Wenger.

THE graduating exercises of the German Hospital, Brooklyn, N. Y., were held May 12, 1904. Thirteen young women received diplomas. A very interesting musical programme was one of the special features of the evening. Addresses were made by President Heitman, of the German Hospital Association, and Rev. Dr. Jacob Loch. Dr. J. H. Droge, chairman of the Executive Committee, delivered the address to the graduating class in a most able manner. Vice-President Francis A. Deck presented the diplomas and medals to the graduates. A reception followed the exercises. In the afternoon the class were given an automobile ride around the city through Prospect Park. The Alumnae Association of the hospital served a dainty luncheon in the Nurses' Home.

THE graduating exercises of the Farrand Training-School in connection with Harper Hospital, Detroit, Mich., were held on the evening of April 28 in the new clinic amphitheatre, which is part of the magnificent operating building just erected in memory of the late S. M. Cutcheon. The principal feature of the evening was the "Practical Demonstration in Nursing" by the graduating class. Interesting addresses were given by Dr. F. W. Manns and Mr. J. L. Hudson, president of the Board of Trustees, who also presented diplomas to the graduating class, numbering twenty-six. Dr. J. H. Carstens, chief of the visiting staff, presented the badges, after which an informal reception was held at the Swain Home for the nurses and their friends.

MISS SNIVELY was the recipient of the following letter on April 26:

"DEAR MISS SNIVELY: The Training-School Committee of the Lakeside Hospital, Cleveland, have instructed me to cordially invite you to give the graduating address to the Class of 1904. The exercises takes place on May 17. Personally allow me to urge you to come. Both Mrs. Robb and I are anxious to see members of our own profession take their rightful place before the nursing public. Please do come.  
"E. MAUD ELLER."

Miss Snively has accepted this invitation.

THE Presbyterian Hospital, New York, graduated the following nurses on May 12: Sara Belle Mounce, Catherine Munro Forrest, Mary Wood Guion, Augusta Hobart English, Sylvia Hartstone Davis, Marion Elizabeth Heselstine,

Ethel Maria Darling, Alice Shove Wood, Margaret Alien Cruise, Jean Cleland, Edith Virginia Gardiner, Margaret Eliza Baker, Julia Carolyn Hicks, Anna Olcenda Becker, Ethel Irene Fuller, Jessie May Welch, Mary Maude Tennant, and Katherine Clarke Mooney.

THE South Side Hospital, of Pittsburg, Pa., held graduating exercises on May 19 with an interesting programme. The following young ladies received diplomas: Miss Mary Ellen Haslett, Oil City, Pa.; Miss Mary Leola McNeese, Euclid, Pa.; Miss Laura Helena O'Connor, Guelph, Canada; Miss Margaret Edna Camblin, New Castle, Pa.

NOTICE TO APPLICANTS FOR ADMISSION TO TEACHERS COLLEGE COURSE IN HOSPITAL ECONOMICS.—Miss Anna C. Maxwell has kindly consented to act as chairman during Miss Banfield's absence abroad. Applications should therefore be made to her at the Presbyterian Hospital, New York City, for all information and application blanks.

THE Training-School of the McKeesport Hospital, Pa., graduated a class of five nurses on May 10, Miss Nora Leone Jones, Miss Marie Faust Watson, Miss Anna Caldwell, Miss Julia Charlotte Jonason, and Miss Caroline Pamela Ricketson.

#### PERSONAL

THE Associated Nurses of St. Louis have secured headquarters in the Fraternity Building, World's Fair Grounds, where visiting nurses may register and receive a pass which will entitle them to the privileges of the building. A nurse will be in charge to welcome and give any information necessary to those of the profession visiting the Fair. Nurses so desiring may have their mail addressed to the "Nurses' Headquarters, Fraternity Building, World's Fair Grounds, St. Louis, Mo." The association is looking forward with pleasure to meeting many visiting nurses, and hope none will fail to seek the rest of a quiet hour at the headquarters when tired with sight-seeing on the Fair Grounds.

Mrs. MARIAN D. LINGENFELTER has resigned as superintendent of the Amsterdam General Hospital, Amsterdam, N. Y., and will take a long rest at her home in Auburn, N. Y. Mrs. Lingenfelter has been in charge of this hospital for twelve years. She has been an active member and an officer in the State Nurses' Association, advocating high standards in the training of nurses. Much regret is expressed by the public in Amsterdam at her resignation.

Miss JULIA M. LEACH has been appointed superintendent of the Salem Hospital, Salem, Mass. Miss Leach graduated from the Salem Hospital Training-School, Class of 1898. She is a member of the Spanish-American War Nurses' Association, and served at Camp Wickoff, Montauk Point, thence to Josiah Simpson Hospital, Fortress Monroe, Va., and was discharged from the government service May 5, 1899.

Miss LOUISE KRAUSS, superintendent of the Lutheran Hospital at 2646 Potomac Street, St. Louis, Mo., has been appointed superintendent of nurses at the World's Fair Emergency Hospital under Dr. Laidley. There were many applicants for the position, among them being one from London, England. Miss Krauss is planning to study medicine at the University of Michigan after the Fair.

A PARTY of trained nurses under the leadership of Countess Bavada, who is an American by birth, a native of New Orleans, but has lived many years in Russia, are on their way to Port Arthur to tender their services to the Russian Red Cross. The six young women accompanying her are from New York, Boston, and Pittsburg.

MR. AND MRS. SAMUEL BLAKE, of London, England, spent a short time in Philadelphia recently. Mrs. Blake was Miss Florence Cameron, a graduate of the Pennsylvania Hospital in 1900. Miss Cameron was one of the nurses who went to South Africa during the Boer War.

MISS LOUISE HUBBARD has been appointed head nurse of the Eye Department, General Hospital, Toronto, and Miss Clara Brown as head nurse of the private wards in the same institution. These nurses are both graduates of the Toronto School, Class of 1903.

MISS EMILY CHILMAN, lady superintendent of the General Hospital, Stratford, Ont., sailed for England and the Continent on April 21. She will be abroad three months, and expects to be present at the conference in Berlin in June.

MISS LISABEL ISAACS, Toronto Hospital School for Nurses, Class of 1891, has been appointed superintendent of night nurses in the new St. Luke's Hospital, St. Louis, Mo. Miss Isaacs entered upon her duties May 1.

MISS IDA R. PALMER has resigned as superintendent of the Training-School at Parks Hospital, Glens Falls, N. Y., and will remain with her sister in Rochester during the coming year.

MISS A. D. VAN KIRK has succeeded Miss Sutcliffe as superintendent of nurses at the Long Island College Hospital in Brooklyn, N. Y., with Miss Anderson as her assistant.

MISS ANNA BOLTZ, a graduate of the Pennsylvania Hospital in 1902, has left for Bar Harbor to take a position in the hospital there.

MISS ELISABETH M. EVANS and patient, of Baltimore, Md., sail June 16 for an extended tour in Europe.



**ANÆMIA IN CHILDREN.**—Among other causes of anæmia G. Carrière mentions overfeeding. An excess of alimentation causes gastric stasis and intestinal auto-intoxication, and resorption of the intestinal poisons destroys the red globules and causes anæmia. The author has observed three cases in which overfed children were restored to health simply by moderating their diet without any other treatment. Anæmia in children may also be caused by chilling, which is not surprising, as the writer has proved by experimentation that cold induces a marked destruction of red corpuscles. Overtaxing the physical or mental strength is another frequent cause of anæmia. The author recommends the usual hygienic measures, and in the way of medication praises the cacodylate of sodium. It is best to use it for a while, beginning with three-drop doses twice a day and increasing a drop at a dose until ten drops are taken twice daily. This may be kept up for eight days, diminished drop by drop until the primary dosage is reached, and a rest of ten days is then taken. Iron treatment may be instituted later.—*Le Nord Médical*.

## THE GUILD OF ST. BARNABAS

IN CHARGE OF

S. M. DURAND

Public Library, Boston



ORANGE, N. J.—April has been a somewhat busy month with us. To begin at the end of things and go backward, the regular service and meeting was held on the 29th at the Church of the Holy Communion, South Orange. A special call had been made for a good attendance, but, unfortunately, it poured rain, which prevented many from being present. By previous arrangements we had the pleasure of greeting Dr. Scudder, from Brooklyn, who came, as he expressed it, to "soak in" information about the scheme which had been under discussion at the General Council. We feared that the inhospitable rain was the most thorough soaking he was likely to obtain, as we assembled rather for further discussion of the "Relief" scheme, than to give any more detailed plan of execution. We feel very keenly that some well-defined plan should be afoot for the relief of the nurse when she falls on evil days, but time and much thought will be consumed before the venture can be made, assured though we are that it is a thing that will surely be accomplished. The ladies of the church gave a pleasant reception at the close of the meeting and we wished the time had been twice as long. On Saturday, April 16, Mr. Ronald Grant gave an organ recital at Grace Church, his selections being greatly enjoyed by all who were able to be present. The sewing meeting held at the Training-School on April 14 was noted as having been the best attended of any in the series and much work was accomplished. April 7 will be remembered as the date of a delightful reception given by Mrs. William H. Williams at her residence, 308 Essex Avenue. Several of the associates received with her, and a large number of nurses availed themselves of the hours from four to six to enjoy her hospitality and the pleasure of meeting one another, which, indeed, is not the least attractive part of these social gatherings.

BOSTON.—The April meeting of the Boston Branch was held at St. Andrew's Church on the evening of the 27th. Owing to the inclemency of the weather the attendance was not large, but the occasion was very cheerful and pleasant, and all were glad to welcome Miss Murray and hear of her mission work at White Rocks. It has already been related in former notes how Indian babies are rescued from being buried with their mothers, and Miss Murray brought with her on her trip East one of these sturdy survivors, who will awaken interest in all who see him. The resignations of three associates were regretfully accepted. Mr. Kidner, the rector of St. Andrews, presided in Mr. Bishop's absence. The present week, and, indeed, this whole month, is full of festivals, as the "great forty days" ends with Ascension Day, falling this year on May 12, and the feasts of Whitsunday and Trinity Sunday also occur in May. It may interest some of the nurses in Boston to hear about the Patronal Festival of St. John the Evangelist, which is this week being celebrated at St. John's, Bowdoin Street. There are a

good many nurses in this congregation, and we hope many of them were present last Sunday. After the procession and singing of the hymn, "Glorious City, Heavenly Salem," the rector, Father Osborne, preached on the life of St. John the Evangelist, saying that the main lesson to be drawn from the heroic labors of this "beloved apostle" was that through sacrifice he attained to the Beatific Vision. This sacrifice was not a grudging one, but was entered into and carried on in such a perfect union with his Master that it seemed the most simple and natural thing to do. St. John did not, even in the beginning, question and worry, nor did he ask to see the whole of his task, or even the end of it. Before he was called to be one of the twelve he did what his father had brought him up to do,—that is, he followed the simple calling of a fisherman,—and when the Master's voice bade him "Follow me," he still obeyed that higher call, going on "from strength to strength" with the same unquestioning faith and obedience. In his persecutions, his trial of expected martyrdom, his exile in Patmos, and, finally, in his long and lonely bishopric at Ephesus, where he was kept on earth so many years after his beloved fellow-apostles had gone before, the spirit of loving submission was still the same. To enter into and understand this spirit is the Christian's surest safeguard in trial and temptation. In the world we must have tribulation, we all know this, but to taste the sweetness of sacrifice is only given to those who, like the beloved John, simply, day by day, follow the Higher Will, which leads them, slowly, painfully perhaps, but surely and safely, to the attainment of their highest hopes and dearest aspirations. These lessons are those that come home to us all the more nearly when we think of our own festival of St. Barnabas, with its message of loving service, and we hope that we may keep it in joy and gladness, feeling the greatness of our gift of mercy—that quality which is "twice blest," as "blessing him that gives and him that takes."

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BROOKLYN.—At the March meeting of the Brooklyn Branch of the Guild of St. Barnabas the topic of discussion was that of the missionary nurse. After considering the question carefully, it was decided to present it again at the next meeting in order to learn the mind of the majority, the resolution passed at the council in Hartford having been read by the chaplain. Another topic of interest was some means of increasing the building fund. Miss Sutfill, who for eighteen years has filled the office of superintendent of the Long Island College Hospital, will retire on May 1 and take up her residence in South Norwalk, Conn. Three of the nurses, who have filled the term of twenty-one, twelve, and nine years respectively, have also resigned their positions, and two of them have opened a nurses' house a short distance from the hospital. One of the members present gave an interesting account of her three months of duty at Butler, Pa., during the typhoid epidemic. She said one could not speak too highly of the chairman of the committee, Mr. J. N. Moore, a lawyer, who gave up his business and worked day and night for the public good; he showed a wonderful talent for remembering the minutest details, and could call each member by name, and made it his duty to provide for the special necessities of each one, carefully picking up the threads and converting the whole into a magnificent piece of work. The nurses were given comfortable, clean beds in a large dormitory, and meals were provided three times a day by the ladies of the Second Presbyterian Church; night suppers were also provided upon application of those requiring the same, and free transportation over the Baltimore and Ohio Railroad to their homes.



It was not only the nurses who were so well cared for, but the people at large, rich and poor alike. The nurses in many instances remained on duty for forty-eight hours. The work was not confined to the epidemic alone, but various diseases developing in the same family were treated in like manner, as well as the complications arising. One instance cited was that of a consumptive man, whose whole household were attacked with typhoid. The Relief Committee took charge, paying all expenses, even to that of providing a servant. One member died, but the man survived. Food, bedding, clothing, delicacies, and even presents for families were paid for by the same. One case was reported as having five reinfections; another, after a normal temperature of twelve days, became reinfected, and two nurses were detailed under the strictest care. One Water Company sent two carloads of pure water. The amount of water consumed may be judged when it is understood that the Relief Committee paid one thousand dollars for the return of water bottles. The State furnished all disinfectants. Dr. Batt personally conducted this matter. Each nurse is to receive an engraved certificate, which will be greatly appreciated.



**THE ABUSE OF FLAT-FOOT SUPPORTS.**—Wisner R. Townsend protests against the too common habit of treating flat-foot by various forms of support without consulting a surgeon. Errors in diagnosis are easily made, and ostitis of tarsus or ankle, metatarsalgia, neuralgia, or an inflammatory concretion of the parts about the inner side of the foot have been mistaken for flat-foot. In one case a sarcoma of the sole of the foot was treated for some time by braces. Moreover, when flat-foot exists, it does not necessarily follow that a support must be applied, for there are contraindications known to the profession, such as extreme spasm, extreme deformity, or inflammatory conditions. Another damage resulting from the indiscriminate use of supports is that many cases, mild in type and easily cured by medical men, are allowed to grow worse, and the patient may become so seriously crippled that operation may be needed, or the case be incurable. The supports may not fit, may not support at all, and may increase, or even produce, deformity. Supports bought by the patient who is his own surgeon cannot be suitable when the principles of the disease are not understood.—*American Journal of Orthopaedic Surgery.*

**THE THERAPEUTIC POSSIBILITIES OF RADIUM.**—In an editorial on this subject the *Boston Medical and Surgical Journal* says in the *British Medical Journal* Mr. John Macintyre writes briefly in continuation of a previous article on work which he has done. He found that lupus and rodent ulcers were very favorably affected by exposure to the rays of radium. Mr. Frederic Soddy suggests the possibility of applying the rays of radium and thorium to the treatment of consumption. The theory being that inhalation of radium solution gives rise to the formation of a film of radio-active matter which persists for a certain definite time, it is conceived possible that radium would continue to exert its activity in the air-cells of the patient's lungs after the emanations themselves had been exhaled.



## OFFICIAL REPORTS OF SOCIETIES

IN CHARGE OF

MARY E. THORNTON

129 East Thirty-first Street, New York City



[We must ask contributors to this department to make their reports as concise as possible, omitting all mention of regular routine business, and stating such facts as are of special interest to absent members or to the profession at large. The JOURNAL has already increased its regular reading pages from sixty-four to eighty, and it must keep within these limits. In order to do this all of the departments are being condensed to make room for our constantly increasing items of interest.—Ed.]

### THE NURSES' ASSOCIATED ALUMNAE

THE Nurses' Associated Alumnae opened its seventh annual convention of three days on Thursday, May 12, in the Drexel Institute, Philadelphia. The president, Miss Mary M. Riddle, called the meeting to order at three o'clock. The Rt. Rev. O. W. Whitaker, Bishop of Pennsylvania, made the invocation, and the president delivered an able address, after which the meeting adjourned.

The official proceedings will be published in full in the July number of this JOURNAL. The officers elected were: President, Miss Mary M. Riddle; first vice-president, Miss Annie Damer; second vice-president, Miss M. M. Whitaker; secretary, Miss Mary E. Thornton; treasurer, Miss Healy. These, with six directors, will form the Executive Board.

The most important business transacted was the completion and adoption of the constitution and by-laws. The question of the future ownership of the JOURNAL was discussed and a satisfactory solution reached. The programme proved to be most interesting, and the social entertainment provided made the week one of great pleasure.

The association was given the freedom of the Drexel Institute—a most delightful building in which to hold such a convention—and every attention and courtesy was shown to the visitors and members. The meeting next year will be held in Washington, D. C.

MARY E. THORNTON, Secretary.

### NEW YORK STATE NURSES' ASSOCIATION.

AMENDMENTS to the by-laws were submitted to the New York State Nurses' Association at the third annual meeting held in Albany, April 19, 1904, and it was resolved that only registered nurses shall be eligible to individual membership in the association, that only such alumnae associations as are composed of members who are graduates from training-schools registered by the Regents of the State of New York, and only such other organizations of which the members admitted after October, 1904, are registered nurses, shall be eligible. Applicants eligible for membership in any local nursing organization belonging to the State association shall not be admitted as individual members. Applications for membership shall be made one month before the regular meetings.

Provision was also made that the Nominating Committee name four candidates for the Board of Examiners. Two of these are to be elected by the association at the annual meeting and the names submitted to the Board of Regents, who will in turn appoint one to serve on the Board of Examiners for a period of five years. Other amendments were held over until October.

During the past year ninety-five new members and ten organizations were admitted, making a total membership of two hundred and thirty-four individual members and twenty organizations. The names of the individuals and associations admitted at the annual meeting are as follows:

Bessie L. Hatfield, Grace E. Adair, Cora E. Sylvester-Douglas, Christena McEwen, Anna Howell Ostrom, Eunice W. Brinkerhoff, Harriet May Harmon, Agnes Boon Baker, Laura C. Duryea, Mary Hennessy, Hildegard Backman, Bessie Massey, Alexina Parsell, Annie P. Evans, Lena Griffin, Susie Butters, Emma Hartlieb, Della Hobertis, Ida M. Topping, Lena Fries, Marguerita M. Hogan, Agnes C. Dunne, Agnes Bertha Smith, Jennie A. Zimmerman, Mary Adelaide Marquis, Emma E. Hild, Marion F. Deane, A. H. Lough, Christiana Crowther, Eliza J. Hodgson, Carrie Jowett.

New York County Nurses' Association.

Alumnae Association of St. John Riverside Hospital.

Alumnae Association of Mills Training-School.

The Alumnae Association of Albany Hospital.

Certificates for registration are now being issued by the Regents of the University.

JESSIE McCALLUM,

Retiring Secretary.

#### THE PORTLAND MEETING

THE Conference of District Nurses that is to be held in Portland is looked forward to with much pleasant anticipation by those who are planning to be present. It is hoped that as many nurses as possible will avail themselves of this opportunity for the exchange of ideas and experiences. The meetings are to be of a very informal nature and will consist largely of discussion of topics bearing upon the relation of district nursing to social and philanthropic questions. With the marked development in methods of philanthropy during the past few years it is interesting to note that the nurse is being given an increasing share in the deliberations of those interested in social and philanthropic questions. While the world at large is learning the economic value of the nurse, she ought not to fail on her part to become better acquainted with the movements of modern thought, particularly those that have a natural bearing upon her own profession. The conference at Portland affords rare opportunities in this direction. Miss Jane Addams, of Hull House, will speak, and there are others of equal interest on the programme.

Following is the programme of the special meetings to be held at the Falmouth Hotel, Portland, Me. The first meeting is scheduled to take place on June 14 at eight P.M. The second will be on the morning following,—the 15th,—at ten A.M. It is hoped that all who attend the meetings will study the topics carefully and will come prepared to assist in animated discussion.

1. "Should district nursing be made so largely an educational and instructive factor as to make the value of skilled nursing rendered only a secondary consideration?"

2. "What are the best methods for a district nurse to pursue in order to secure sufficient care for her very sick patients at night?"

3. "What are the best methods for caring for contagious cases when it is impossible to have a nurse specialize one class of diseases? Should a nurse take obstetrical cases when doing general nursing?"

4. "The advisability of impressing upon the public the growing necessity for nurses devoted to the care of cases of tuberculosis."

1. "To what extent can the administration of sick diet and general relief be entrusted to district nurses without reference to investigating societies?"

2. "Is a central home the best way to keep up the interest and esprit de corps of the nurses, or should a nurse have residence in the district in which she works?"

3. "Comparative methods of bookkeeping, reports, records, etc. What style of bag, apron, dress is advisable? Has a prescribed street uniform advantages over a less conspicuous style of dress?"

4. "Why should there not be a Federation of Nurses in America adopting a uniform method both in dress and administration? See Queen's Nurses in England and Victoria Order in Canada."

JANE ELIZABETH HITCHCOCK, Secretary,  
285 Henry Street, New York.

#### REPORT OF THE CLASS IN HOSPITAL ECONOMICS

To Miss Benfield, Chairman.

The report of our instructor, Miss Alline, has already informed you of our special advantages during the month of April in the line of excursions and lectures. In addition to this we should like to emphasize the fact that this course gives us unusual opportunities of studying not only hospital organization of all kinds, but also the allied fields of district nursing and public charities.

The visit to the Association for the Improvement of the Condition of the Poor and the United Charities was extremely helpful, as they are dealing with the same class of people that furnishes the majority of patients in general hospitals.

Several members of the class are planning to spend a whole day with one of the Association for the Improvement of the Condition of the Poor visitors, accompanying her on her round of visits. We have been invited by the manager of the association to visit "San Breeze," their summer home for poor women and children on Coney Island.

The Domestic Science Department of Teachers College kindly arranged a course of six lessons, conducted by Miss Way, the dietitian at Whittier Hall, the College Dormitory, in the practical management of the domestic department of the institution. Respectfully submitted,

STUDENTS' COMMITTEE (per ISABELLA E. JEWELL).

#### THE PENNSYLVANIA STATE MEETING

THE Graduate Nurses' Association of the State of Pennsylvania met at Wilkes-Barre April 20 and 21. The first session was called to order by Miss Brobson, the president. Rev. Dr. Jones opened with prayer, which was followed by an address of welcome by Dr. G. W. Guthrie. A paper on "The Preliminary Education of Nurses," by Miss Milne, of the Presbyterian Hospital of Philadel-

phia, was read by Miss Dunlop, another on "The Benefit of Registration to the Public," by Miss Curtis, of Phoenixville, Pa.

The usual business was transacted. One hundred and twenty applications for membership were accepted. Miss Giles, of Pittsburg, submitted her resignation as secretary of the association, which was finally accepted.

Invitations from Erie, Reading, and New Castle were read for the next quarterly meeting to be held in July. It was finally decided to accept the invitation to Erie, in order that members from the northern part of the State might have a better chance of attending.

During the next two months circulars will be printed, and as far as possible distributed to all nurses in the State, fully explaining the principles of registration.

If anyone knowing of nurses who have not received a copy, or of anyone desiring information on this subject, will send the names to Mrs. Edwin Lewis, of 823 Second Street, Braddock, Pa., they will be supplied.

If all nurses who attended the Philadelphia meeting in June or the Pittsburg meeting in October of 1903 and who have not paid their initiation fees and annual dues will do so before the annual meeting in October they will be considered charter members. All checks should be sent to Miss A. M. Shiels, of the Methodist Episcopal Hospital, Broad and Wood Streets, Philadelphia, Pa.

A copy of the constitution and by-laws can be obtained by applying to the secretary,

Mrs. Geo. O. Louisville,

Chairman Publication and the Press.

#### NOTICE TO APPLICANTS FOR ADMISSION TO TEACHERS COLLEGE COURSE IN HOSPITAL ECONOMICS

Miss ANNA C. MAXWELL has kindly consented to act as chairman during Miss Danfield's absence abroad. Applications should therefore be made to her at the Presbyterian Hospital, New York City, for all information and application blanks.

"THE Associated Nurses of St. Louis" are making arrangements for headquarters on the Fair Grounds, where the visiting nurses may meet, rest, and become acquainted with one another. As plans cannot be fully completed in time for this month's issue any information desired upon this subject by nurses visiting the Fair in June will be gladly given by the secretary of the Associated Nurses of St. Louis, Helen G. Kelly, 3943 Olive Street, St. Louis, Mo.

#### REGULAR MEETINGS

NEW YORK.—The Alumni Association of the New York City Training-School held its regular monthly meeting at the Academy of Medicine, 17 West Forty-third Street, on Tuesday, May 10. After the usual routine of business Edward T. Devine, Ph.D., editor of *Charities* and general secretary of the Charity Organization Society, addressed the meeting on "The Trained Nurse in Philanthropy." Dr. Devine said that in looking for a text for this occasion his eye fell on one in Psalm xci., "A thousand shall fall at thy side, and ten thousand at thy right hand," but knowing the retiring attitude of nurses he felt that they would protest that that honor belonged to the medical profession. Others in Psalms cxvi. and cxix., "I was greatly afflicted" and "It is good for me

to have been afflicted," for personal reasons he discarded also (had he been through a training-school he would have thought these the most appropriate), but found his key-note in Psalm lxxxv., "Mercy and truth are met together," for in a nurse's work as nowhere else are mercy and truth joined together in inseparable union. The profession is passing through a stage of development and the trained nurse has been subjected to the microscope of observation and the scalpel of criticism. She is on the field of battle (or the hospital camp on war's grim border), in hospital wards in peaceful cities, in and out among the homes of the poor on errands of mercy, at the bedside of the well-to-do. She has fallen from exposure, from physical strain, and from the heroic attempt to perform the impossible as nobly as if on the field of battle. He said the profession is not overcrowded and that we have not yet reached the point of saturation. (But the solution needs filtering, though he may not have noticed the drag.) He pointed out two heresies. One was that if she were merely to fetch and carry for the physician, she might feel as irresponsible as the hede-carrier, who said the man at the top did all the work. The other was that womanliness and housewifeliness were the most essential qualities of a nurse. While yielding to none in his admiration of womanliness or his esteem for housewifeliness, he thought these qualities should be in the background in the sick-room, where the skilled professional nurse should take command of the situation, laying aside the privileges of sex, age, beauty, or ignorance, and with an impersonal interest and a higher ideal than any other woman needs accomplish the work to which she is called. All this gives her an admirable foundation for philanthropic or charitable work. Her horizon must be widened to see the causes of all the difficulties in which the family are involved, and after getting the right point of view and learning the root of the evil, she must treat it with that same thoroughness and adherence to truth and mercy which she would use towards physical weakness. Here he said it might be well to warn us against allowing ourselves or our profession to be made a cat's-paw of for furthering the interests of societies, settlements, missions, and churches, to increase converts, club-members, etc., instead of insisting upon the dignity, independence, and genuine worth of our profession in preventing disease or relieving the sick. The nurse in philanthropy very nearly holds the key to the situation, as fifty per cent. of all charitable work is due to illness and at some stage needs a nurse. If, then, those who are engaged in this most gracious ministry—the care of the sick—add to their healing art, the knowledge and enthusiasm for the science of philanthropy, which, after all, no less than the science of medicine, underlies their art, they will surely exert what will be very nearly a preponderating influence in the relief of distress and the working out of a better social order, in which there shall be less of sickness, suffering, premature decay, and death, and more of healthy living, of wholesome rational enjoyment of life, when nursing and philanthropy will not have ceased, but will have their opportunity in higher and more attractive spheres, and when our problem will not be as much how to lessen human misery as how to add still more to the happiness and well-being of mankind. After the meeting the nurses adjourned to the banquet hall. The refreshments which followed were a donation from Mrs. David Ingersoll and Miss Canfield.

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NEW YORK.—The annual meeting of the Association of Graduate Nurses in Manhattan and Bronx was held on May 9, at four-thirty P.M., at the League for Political Education, 23 West Forty-fourth Street. The officers elected for the



coming year were: President, Miss M. W. McKechnie; vice-president, Miss L. F. Nicolai; secretary, Miss A. S. Bussell; treasurer, Mrs. F. Brockway; trustee (three years), Miss M. E. Shannon. The report of the secretary showed that fifty-four members had been admitted during the year. The treasurer reported that there was a balance to the credit of the association of seventy-four dollars and forty-three cents. The report of the delegates to the New York State Nurses' meeting was read and approved. Three applications for membership approved by the Membership Committee were voted upon favorably, and seven new members were elected—viz., Miss M. S. Moore, Miss J. C. Allan, Miss O. E. Burr, Miss L. Rautrstein, Miss L. E. Weebus, Miss G. Thorne, and Miss C. F. Peake. The subject of this association applying for membership in the County Nurses' Association was discussed at some length. It was finally voted to defer any action towards this for the present, and to retain our membership in the State Nurses' Association. The president spoke of the desirability of THE AMERICAN JOURNAL OF NURSING being owned by the Associated Alumnae, and said that in the movement towards this object our association ought to be prepared to take its part. Mrs. M. Moore moved that the obtaining of a charter be considered. A committee was appointed to ascertain the necessary steps to be taken towards obtaining a charter; also what advantages and disadvantages would be thereby entailed. Mrs. Brockway spoke to the meeting of the Nurses' Auxiliary Society for Stony Wold, now being formed with the object of providing some place in the Adirondacks for nurses who had contracted tuberculosis.

CINCINNATI, O.—The annual meeting of the Graduate Nurses' Association of Cincinnati was held on April 27 at the City Hospital, Miss Greenwood in the chair. The election of officers resulted as follows: President, Miss Hamer Greenwood, superintendent Jewish Hospital; first vice-president, Miss Olive Fisher, superintendent Training-School City Hospital; second vice-president, Miss McEwen, superintendent Training-School Christ Hospital; secretary, Mrs. Hartsock, superintendent Training-School Presbyterian Hospital; treasurer, Miss Petering, superintendent Home for the Friendless; councillors, Miss Wallers, Miss Adler. In her address the president spoke of the work accomplished by the Graduate Nurses' Association during the year. This work has been largely directed along the lines of organization and State legislation. The call for a meeting of nurses to consider the formation of a State association was sent out by the association, which had also the pleasure of entertaining the delegates with a trolley-ride and luncheon. The majority of the graduate nurses in good standing in the city are members. A registry is also maintained for the benefit of nurses in private practice. The annual report will shortly be published.

OTTAWA.—A meeting for the organization of the Alumnae Association of St. Luke's General Hospital graduate nurses was held at the hospital on March 31, 1904. Miss Chesley was elected to the chair pro tem. After a free discussion as to the need for such an organization it was shown to be the sense of the meeting that an Alumnae Association should now be formed, and a committee of four was appointed to draw up a constitution and by-laws, the committee to report at the next meeting, which was held April 14. The constitution and by-laws presented were approved of by the meeting and the following officers were



unanimously elected: President, Miss Chesley, lady superintendent; vice-president, Miss Collins, Class of 1903; secretary-treasurer, Miss Raynolds, Class of 1901. As the Training-School is still in its infancy, the graduates are few, but judging by the enthusiasm displayed at the meeting and the sincere regrets received from all who were unable to attend we look to the future for a very flourishing association. The society was started with a membership of seventeen, and the hope of six more after the graduation exercises on May 31.

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BOSTON.—The New England Hospital Alumni Association held their annual meeting on the afternoon of May 4. It was called to order at two P.M., Miss Mary C. Hall, vice-president, presiding. Letters from absent members were read. The sick relief fund was discussed, and the feasibility of owning shares in the Stock Company of the Club-House. It was moved to purchase one share. Tribute was paid to our first graduate, Miss Linda Richards. A vote of thanks was given to Miss Dillet for long and continuous service. The graduating class was present. The following officers were elected: President, Mrs. Mary C. Hall; first vice-president, Miss Dillet; second vice-president, Miss Grace Robinson; third vice-president, Miss Jennie E. Harris; secretary, Miss D. Hodgkins; assistant secretary, Miss S. Hogarth. The meeting adjourned at four P.M. until October 8. The graduating class was entertained at the Club-House. Salads and ices were served. Selections were rendered by Miss Annie Fielding on the piano and charades were given in the parlor during the evening. The evening closed with "Auld Lang Syne."

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CLEVELAND, O.—On Wednesday, April 29, at one o'clock, the Alumni Association of the Cleveland Training-School for Nurses gave a luncheon in honor of the graduating class, which held their graduating exercises on the evening of the following day. The luncheon was held in the assembly hall of the Hollenden Hotel. Five tables were set, each accommodating eight persons. The decorations were of roses, pink, red, and white, with asparagus fern, and the menu cards were of white with gold ribbon, the colors of the class. Miss Lottie Guy, president of the association, was toast-mistress, and many toasts were given. Mr. W. H. Webber, superintendent of the hospital, spoke on the "History of the School," and was followed by Mrs. Jean McGregor, the oldest graduate nurse in the city, Miss Alice Bowman, Miss Myrna Williams, Miss Florence Maillem, Miss Charlotte Ludwig, Miss Cozzy, principal of the school, and Miss Ethel Osborne, who responded for the class. Many letters of congratulation were read, among them one from Hon. Myron T. Herrick, who is president of the hospital.

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INDIANAPOLIS.—The second annual meeting of the Hope Hospital Nurses' Alumni Association was held at the hospital parlors on Tuesday afternoon, May 3, 1904. The reports presented by officers and committees made it evident that the association has enjoyed a prosperous year, in which much excellent work has been accomplished. Election of officers for the ensuing year resulted as follows: President, Mrs. E. G. Fournier; vice-president, Miss Flo. Conklin; secretary, Miss Alice McCully; treasurer, Miss Mary Dyble; chairman Social Committee, Mrs. Elliott; chairman Programme Committee, Miss Elma Weaver; historian, Miss Elizabeth Melville; badge manager, Miss Ella Jones. The association has a membership of about thirty and is in an excellent condition in every

way. A feature of the meeting on Tuesday was an address by the president, Mrs. Fournier. Miss Alice McCully was elected a delegate to the meeting of the national association in Philadelphia on May 12. Miss McCully will be accompanied by Mrs. Fournier, Miss Conklin, Miss Dustenan, and Mrs. Elliott.

**MICHIGAN.**—An earnest effort to place the trained nurses of the State on a higher plane was consummated May 10, when about one hundred and thirty graduate nurses from all over the State gathered in Chaffee Hall, Detroit, Mich., and organized "The Michigan State Nurses' Association." The direct object is to effect State registration for graduate nurses. All those present became charter members of the new organization. The meeting was addressed by Mayor Maybury, C. A. Kent, and Dr. J. H. Carstena. Many prominent women in the profession were present. The election of officers resulted as follows: President, Mrs. L. E. Grotter, Harper Hospital, Detroit; First Vice-President, Miss Ida M. Barrett, U. B. A., Grand Rapids; second vice-president, Miss Ida M. Tracy, University of Ann Arbor; recording secretary, Miss Henrietta Potts, Grace Hospital, Detroit; corresponding secretary, Miss Sarah E. Sly, Birmingham, Mich.; treasurer, Miss Mary Fletcher, U. B. A., Grand Rapids.

**BROOKLYN.**—The regular monthly meeting of the Brooklyn Hospital Alumnae was held on Tuesday, May 3, at three-thirty P.M. The president being absent, the meeting was called to order by the vice-president, Miss Monteith. Twenty-five members were present. After the treasurer's and secretary's reports were approved, a very full and interesting report of the convention of the New York State Nurses' Association, which was held in Albany on April 19, was given by Miss Monteith, who represented our society. The important question of the Associated Alumnae owning THE AMERICAN JOURNAL OF NURSING was then discussed, our alumnae voting to purchase a share in said JOURNAL if it be decided in Philadelphia that the alumnae associations should purchase the balance of the stock. The question of the endowment fund was discussed, and it was decided to extend the time for raising the money to January 1, 1905. The meeting then adjourned.

**DANBURY, CONN.**—The regular meeting of the Graduate Nurses' Association of the Danbury Hospital was postponed to April 19 on account of the funeral of Lieutenant Ernest Weichert, of the United States Navy, a brother of Miss Susie Weichert, an esteemed member of the association. After the usual formalities letters were read from the newly elected honorary members at the annual meeting—viz., Miss Linda Richards, the first graduate nurse in America; Miss Marion Thornton, author of the closing song of the association; Mrs. Clark Barnum, president of the local Woman's Christian Temperance Union, and Mrs. Sidney Starbuck, of Brooklyn, N. Y., a sincere friend of the Danbury Hospital and its interests. It was voted that these letters be put on file in the records, etc. A report of the New Haven meeting stated they were unable to transact the important business, as there was not a quorum present.

**CLEVELAND, O.**—The Graduate Nurses' Association held its regular monthly meeting at the Young Men's Christian Association Building on Tuesday, April 26. There was a large attendance, and the meeting was opened by the president,

Miss V. V. Lewis. Three new members were admitted to the association—Mrs. E. A. Smith, Miss Van Veeler, and Miss Mildred Skirball. A report was read from the Central Registry of the Graduate Nurses' Association. The registry has only been open two months and already fifty nurses are enrolled, and it has been well patronized by the leading physicians. Dr. Friedrich, the city Health Officer, then gave a most interesting talk on "Typhoid and the Condition of the Water in Cleveland." A committee was appointed to revise the constitution and by-laws of the association, after which the meeting adjourned until the last Tuesday in May.

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NEW YORK.—At the regular monthly meeting of the Roosevelt Hospital Alumnae Association, held May 5, the following letter was read:

"Miss Mary A. Samuel, Superintendent of Nurses, Roosevelt Hospital, New York.

"MY DEAR MISS SAMUEL: In accordance with our conversation of yesterday, I enclose herewith a check for five hundred dollars, being a gift by Mrs. James A. Roosevelt to the "Fund for Sick Nurses" of the Roosevelt Hospital, which she sends in recognition of the benefit she has received from trained nursing during the past winter. Yours truly,

"W. EMLEN ROOSEVELT."

This gift of Mrs. Roosevelt has added greatly to the furtherance of the association's endeavors to place the fund on a firm basis and enlist the interest and support of all the members.

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PHILADELPHIA.—The annual meeting of the Alumnae Association of the Presbyterian Hospital in Philadelphia was held at the hospital on Commencement Day, Tuesday, May 3. Fifty-two members were present. The retiring president, Miss Milne, gave a short history of the association during the eight years she had been president, and put in an urgent plea for all the members to join the Pennsylvania State Nurses' Association and work for State registration. The secretary reported a good average attendance at the meetings during the year, showing the interest of the members in the work of their alumnae. The treasurer reported the alumnae in a good financial condition, and she recommended that in the event of the Associated Alumnae not being able to purchase the JOURNAL that this alumnae consider becoming a stockholder.

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DISTRICT OF COLUMBIA.—The bill for the registration of nurses introduced in Congress in January and commented upon by the editor in the March JOURNAL was discussed at a special meeting held March 19. The nurses voted not to accept the bill as it stood. A committee of nurses was appointed to prepare a new bill, which has been printed and circulated and will come up at the November meeting for discussion. At the semi-annual meeting in May Miss Nevins, president, most effectually brought before the nurses the matter of ownership of the JOURNAL by the Associated Alumnae and the importance of individual subscription, with the encouraging response of twenty new subscribers. The Graduate Nurses' Association was formally incorporated April 15.

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PHILADELPHIA.—The annual meeting of the Alumnae Association of the Training-School for Nurses of the Methodist-Episcopal Hospital was held on Wednesday, April 13. The attendance was unusually large, the importance of the meeting being fully appreciated. The chairman of the Nominating Com-

mittee announced the following officers elected: President, Miss Lillian Waterman; first vice-president, Miss May Ellis; second vice-president, Miss Orpha Shipman; secretary, Miss Emma C. Miller; treasurer, Miss Fannie Ferris. The meeting was full of interest, and after all business had been transacted it was adjourned for the social hour, when refreshments were served.

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WILLIAMSPORT, PA.—The regular monthly meeting of the Alumnae of the Williamsport Hospital Training-School for nurses took place in the parlors of the Nurses' Home on Thursday, April 28, at three P.M. It was the best attended meeting of this year. Dr. G. D. Nutt gave a practical and instructive discourse on "Surgery," and at the close of the talk a vote of thanks was tendered him for the kindness conferred. After the lecture a short business meeting was held. Two new members were admitted. The May meeting, being the annual meeting, officers for the ensuing year will be elected.

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PHILADELPHIA.—The regular monthly meeting of the Alumnae Association of the Woman's Hospital, Philadelphia, was held at 1227 Arch Street on May 11, 1904. There was a large attendance, fifteen members and three visitors being present. Miss Ball's name was proposed for membership. She was of the Class of 1901. The treasurer, Miss Greaney, read an interesting account of the Woman's Hospital from its incorporation in 1861 up to date, which was very much appreciated by those present. The June meeting will be held at the Woman's Hospital by kind invitation of Dr. Seabrooke.

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ROCHESTER.—The regular quarterly meeting of the Rochester Homœopathic Alumnae Association was held at the hospital on Tuesday evening, May 3, and was one of the best attended and most interesting meetings that they have ever had. Miss Julia Bailey was appointed as its representative to attend the "Seventh Annual Convention of the Associated Alumnae," to be held in Drexel Institute, Philadelphia, May 12, 13, and 14. A committee was named to draw up a "Code of Ethics," and it was decided that the association make application for membership in the Local Council.

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NEW YORK.—The regular meeting of the Bellevue Alumnae was held at the Training-School on Thursday, April 21, the president, Miss Markham, in the chair. Two members of the association now in Europe, Miss Dock and Miss Lamp, were appointed delegates to the International Congress in Berlin. Miss Markham, Miss Rhodes, and Mrs. Bohling were appointed delegates to the convention of the associated alumnae in Philadelphia.

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NEW YORK.—At a meeting of the Mt. Sinai Alumnae, held on May 5, the resolutions drawn up by a committee previously appointed, regretting the loss of a late member, Miss Isabel Ash, were adopted. Fourteen new members were elected. Reports from Committees on County and State Meetings were accepted. After a lengthy business meeting refreshments were served.

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NEW YORK.—The meeting of the New York County Nurses' Association was held at the City Hospital, on Blackwell's Island, on the evening of Tuesday, May 3. There was a very good attendance of members and guests. The next meeting will be held on the first Tuesday in October at the New York Hospital.

**ALLEGHENY.**—The Class of 1900 of the Nurses' Alumnae Association of the Allegheny General Hospital gave a euchre and dance on April 21 at Waldorf Hall, Allegheny, at which they cleared five hundred dollars to be added to the fund for endowing a bed for nurses in the new hospital, now almost completed.

**NEW YORK.**—St. Catherine's Guild for Graduate Nurses held its first annual meeting at St. Rose's Settlement, 257 East Seventy-first Street, on Tuesday, May 3, at three-thirty P.M.

#### BIRTHS

In Washington, on April 21, 1904, to Mrs. Dr. Vedder a daughter. Mrs. Vedder was formerly Miss Lillian Norton, a graduate of the Pennsylvania Hospital in 1901.

In Wilkes-Barre, Pa., March 26, to Mrs. G. W. Reschke, a daughter. Mrs. Reschke graduated from the Franklin County Hospital, Greenfield, Mass., in 1897.

In Leyden, Mass., April 4, to Mrs. William A. Barber, a son. Mrs. Barber graduated from the Franklin County Hospital in the Class of 1900.

#### MARRIED

In Philadelphia, April 14, 1904, at the residence of the brother-in-law of the bride, Amanda J. Armistead, graduate of the Philadelphia Hospital, Class of 1893, late of the Army Nurse Corps, to Major Henry Hunt Ludlow, United States Army. Owing to recent deaths in the families of both contracting parties the wedding was exceedingly quiet. Major and Mrs. Ludlow will reside at Oktibbeha, Miss., where Major Ludlow is stationed as military instructor at an agricultural college.

At Woodstock, on April 6, 1904, Miss Helen Holmes, graduate of the Toronto General Hospital Training-School for Nurses, Class of 1901, to Mr. Arthur Fairbanks Gibbs, of Port Arthur, Ontario.

In Philadelphia, on April 20, Miss Emily Liser to Mr. William Roos, of Chicago. Mrs. Roos was a graduate of the Pennsylvania Hospital, Class of 1902.

#### OBITUARY

ENTERED into rest, Mrs. Mary Mathews, at the Cleveland General Hospital, April 3, 1904. Mrs. Mathews was a graduate of the Class of 1896, and also a Methodist Episcopal deaconess. A very large circle of friends will mourn her loss.

At a meeting of the Cleveland General Hospital Alumnae Association the following resolutions were adopted:

"WHEREAS, God in His infinite wisdom has seen fit to remove from our midst a dear sister; be it therefore

"Resolved, That while we bow in submission to the will of our Heavenly Father, we feel that we can best hold our sister in loving remembrance by striving to emulate that goodness and sweet, loving sympathy which characterized her Christian character.



"Resolved, That we extend to her family and friends our heartfelt sympathy.

"Resolved, That a copy of these resolutions be forwarded to the family, THE AMERICAN JOURNAL OF NURSING, and placed on the records of the association.

" CORNELIA STOELZING,

" PAULINE RENTER,

" Committee."

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At the Long Island College Hospital, Brooklyn, April 19, Miss Alise Lucy Wood, formerly of Cork, Ireland, of rapid tuberculosis following pneumonia.

Miss Wood graduated from the Training-School for Nurses of the above hospital in the Class of 1889, and has practised her profession in England, Ireland, and America.

The following resolutions were adopted at the May meeting of the Alumnae Association:

" WHEREAS, It has pleased God to call from her labor one of our most faithful and indefatigable nurses

" Resolved, That we express to the family of the deceased our deepest sympathy with them in their bereavement.

" Resolved, That a copy of these resolutions be sent to her family and recorded on the minutes of our association, and also be sent for publication in the nursing journals.

" J. E. O'DALY,

" REGINA KELLEY,

" CLARA HALL,

" Committee."

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THE Alumnae Association of Mt. Sinai Training-School for Nurses has learned with deep regret of the death, after a short illness, of Miss Isabel Ash at her home in New York City.

Miss Ash was a graduate of the Class of 1883 and a member of the alumnae since its organization; therefore be it

" Resolved, That our association and the nursing profession have lost a sincere and devoted member; and be it further

" Resolved, That the sympathy of this association be extended to her family in their bereavement, and that copies of these resolutions be printed in THE AMERICAN JOURNAL OF NURSING and in the *Trained Nurse*, and be entered in the minutes of this association."

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At Toronto, April 23, Rose Pearson MacMillan, graduate of the General Hospital, Class of 1884.

Mrs. MacMillan had held the position of head nurse, Woman's Infirmary, Asylum for the Insane, Mimico, Ont., for the last five years.

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## FOREIGN DEPARTMENT

IN CHARGE OF  
LAVINIA L. DOCK



### THE NURSING SYSTEM OF ITALIAN HOSPITALS

(Concluded from page 651)

AN important paper on this subject was written by Signora Angelo Celli, of Rome, in 1901.\* Signora Celli deals with the subject as fearlessly as does Dr. Hamilton, of France, in her articles. Space does not allow us to give it in full, as we should like to do.

Beginning by sketching the reforms of Florence Nightingale and the systems of the great "free" nursing institutions of Hamburg and Berlin, she goes on to describe the nursing system of Italy, and we are glad to find that the articles on that subject which have appeared in this JOURNAL are verified by her statements and descriptions. After mentioning the Sisters of Charity she says:

"The servant-nurses are the ones who really attend to the sick. Few indeed are the hospitals where this is done by the sisters—for example, to a certain extent in Rome at San Giovanni Hospital, at the Cottolengo in Turin, at the Civil Hospital of Udine, etc. Still fewer are the examples, as at Pavia and in the Hospital S. Maria Nuova in Florence, where semi-religious orders of women who have taken no regular vows are in charge of the wards and perform all the most important and delicate duties for the sick. In all the other large hospitals the service is regulated as before described."

After discussing the economic side, of cheapness to the hospital where religious orders are in charge, she says:

"The discipline of the religious orders is certainly vastly superior to that of the lay nurses, and this is of extraordinary importance for those attending upon the sick. But the admirable discipline of the Catholic Church has this one defect: Instead of recognizing first the medical authority, it places first the religious authority. From this cause arise various stumbling-blocks. The service of the sick is looked upon as labor rewarded in heaven, and it is not considered necessary to teach it as a profession. It is regarded as a religious function.

"It has happened that sisters have refused to carry out medical orders for children, saying that it was much better they should become angels. In one instance, when a patient had a severe hemorrhage, instead of calling the physician the sister went for the priest. Another on a winter night allowed a patient with pneumonia to get up, and the latter was found by the physician, half-dressed and dying, kneeling upon the cold floor to pray.

"This is not said to criticize, for I am the first to recognize the great merits of the sisters. But science is to-day too far advanced, and to be a com-

\* "La Donna Infermiera," by Anna Celli, in the *Unione Femminile*, Nos. 3 and 4 and 7 and 8 Milan, 1901.

potent nurse it is absolutely necessary that the nurse be thoroughly taught, and not limited to the religious service.

"The nurse should occupy herself solely with the sick and leave all else to be done by others. She should be exclusively subordinate to the medical officers and follow rigorously all their orders.

"She should be put through a practical and theoretical course, and be capable not only of recognizing grave symptoms, but also, in times of emergency, of applying the remedy. And before practising, she should be well instructed, partly by the physicians and surgeons, and partly by the trained and qualified head of nurses.

"She should not, from reasons of false modesty, leave the most important parts of the care of the sick to attendants, but it should be her highest duty and honor to have no ignorant person touch the patient.

"She should not wear a dark habit and immense head-dress, which impedes work and becomes a vehicle for micro-organisms, but choose a light, washable dress.

"Until such reforms can be made the religious sister can never be a real and model nurse in the modern sense of the word.

"To-day, the care of the sick in Italy is largely in the hands of lay persons, illiterate, and engaged as servants. In general they are admitted from the age of eighteen to forty years, in one hospital at fifteen, in another at sixteen. In another there is no rule. Usually only unmarried women are accepted, because the work requires that they should live in the hospital. However, this rule is not in force in a number of hospitals. In two\* before being engaged as nurse the applicant must spend six months in the laundry. In other hospitals she is engaged without condition. In five she must give some unpaid time—in one two months, in another three, in another two years, in another forty days—before being definitely accepted. In one it is compulsory to attend instructions, in another it is voluntary. In some practical instruction is given. In others practical and theoretical instruction. At the end of the latter an examination is given.

"At Pavia a physician gives a course of two-months' teaching after the nurses demonstrate that they can read, write, and do simple arithmetic. At Ferrara the course lasts four months, with one lesson a week, and comprises medical and surgical work. At Siena the physicians give a theoretical course of six months. If the applicant cannot pass a satisfactory examination in this, he or she is not accepted. In Florence, every year, the physicians and surgeons give a practical and theoretical course of six months, and this, as at Rome, may be attended by applicants.

"These courses appear well on paper (and they certainly represent a great step in advance), but as actual fact they often do more harm than good. Instead of being of practical benefit they only serve to confuse the ideas of the pupils. The instructor should be able to descend to the level of the pupils, so as to explain things in a way they can understand. Certainly it is most difficult for a class of young persons who have scarcely gone through the elementary schools to understand any part of so complicated an organism as the human body.

"Instead of being made to memorize the skeleton and its parts would it not be better for the nurse to understand the daily functions of the body? So it

\* In the original paper the names of all hospitals are given with the facts, but are omitted by us for the sake of brevity.

happens that, whether the course is taken or not, the ignorance of the pupils remains the same. Especially, even if the course is taken, they have no idea of asepsis and antiseptics, of the diets for the various maladies, of how to apply treatment, and so on. Who ever teaches them their duties towards the sick? Who shows them how to make a patient comfortable? Who drills them in the cleanliness so essential in a ward or sick-room? Who teaches so many other little essential points? The physician cannot do this. Often he does not know how himself. No one can teach this but a woman, and therefore the nurses must have a head nurse who can teach them.

"After having passed the requirements of the different hospitals they are taken into service under various economic conditions.

"The table which follows shows better than words the hours of work of the servant-nurses and their rates of payment.

"From this table it will be seen that their financial conditions are not brilliant, especially in comparison with the nature of the work they are called on to perform, and this is perhaps one reason why women of a higher grade do not enter the service.

"In many hospitals—for example, in Rome—in their free hours they have to do their own laundering. Few make any provision for old age; in others they are dismissed when no longer capable.

"As the result of insufficient pay the nurses demand fees from the patients. They have a marvellous art in extracting something, even from the poorest. The relations of the sick ones, hoping to get them better treatment, often give beyond their means.

"I do not know whether any hospitals forbid the taking of fees, but certainly in some the authorities count upon it in order to pay smaller wages. Then too this meagre payment often drives them into illicit or dishonest ways of gaining money.

"In general the nurses have the daily care of from eight to fifteen patients, and twice as many by night, but there are hospitals where one nurse may have thirty and over to attend and wait on.

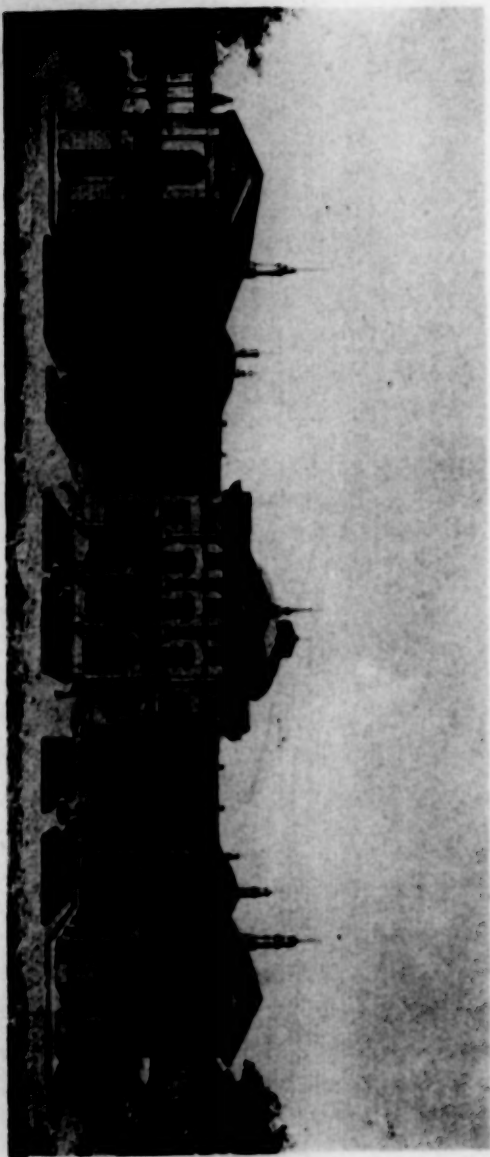
"Tuscany is undoubtedly the most advanced part of Italy in regard to hospital service. Siena and Florence especially have excellent rules. The work of the nurses is well regulated and their future is provided for.

"On the other hand, in such centres as Turin, Milan, Rome, Naples, the service leaves much to be desired. Shameful conditions are found in one of the hospitals of Naples, where the patients nurse one another. In the last twenty years much has been done to improve the surroundings of the hospitals, but when will these most necessary reforms be made in the service? It is a question of the highest importance for the whole people: Of what use are hospitals if people will not go or stay there because they are badly treated?

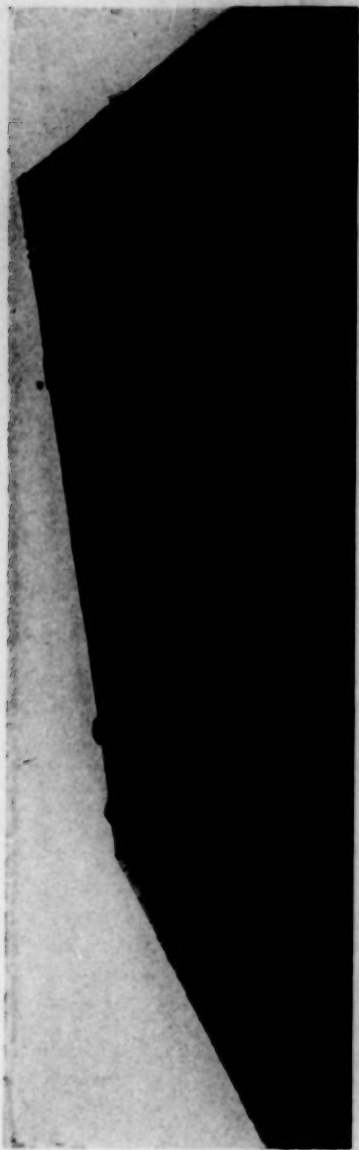
"The service in private duty is even worse than in the hospitals and is in great need of improvement."

In the table of statistics Signora Celli gives the hours of work, the wages, the food, and the accommodations for nurses of some forty-five hospitals, with remarks on special points. For want of space we condense this. Six hospitals fix their hours of work at twelve. Several give from ten to fourteen. Several have irregular periods, as: first day, nineteen; second day, eleven; third day, eleven. The round is then repeated. Others of these arrangements are: first day, seventeen; second day, seventeen; third day, eight; fourth day, five; and

FRONT VIEW OF THE NEW HOSPITAL IN ROME



BIRD'S-EYE VIEW OF THE NEW HOSPITAL IN ROME



first day, thirteen; second day, eleven; third day, ten; fourth day, seventeen. Every four days one free. Another is: first day, seventeen; second day, twelve; third day, seventeen. Every three days one-half day and one night free. One or two models give a six and one or two an eight-hours' service, while one announces thirty-seven hours every third day! And another one, more inhuman yet, thirty to forty-eight hours consecutive service, and two others from twenty-four to forty-eight! The wages vary from what would equal two dollars per month (not week) to eleven dollars per month. Eighteen of these hospitals supply no food to their nurses; several give two meals a day; one, wine only. Some others give food by weight, while some others give them the patients' full diet. None of the meals sound over-abundant.

For sleeping-accommodations, seven hospitals give none. Of the others, the nurses are put up in numbers running from one in a room to forty-four in a dormitory described as "low and small." Several give the nurses small rooms in or near the wards.

Among the "remarks" are found such as this: "Every month eight to ten hours' rest," "every fifteen days three hours to go out," and one melancholy remark shows that the foundling asylums supply some of the material which grows up into servant-nurses.

At the time when this article was written these enslaved beings were unorganized and little provision was made for their future, but within the last few years they have formed organizations and have thereby in many details improved their conditions. They now have a journal called *L'Infermiere*, or monthly organ of the Italian Federation of men and women hospital nurses and masseurs, and their league included in 1903 some twenty-nine cities. In a number of this journal which Signora Celli was kind enough to give me there was an announcement of their first National Congress, to be held in Rome in March of this year, and the programme looked as though there were some bright and serious minds at work over their problems.

If this body of workers could little by little elevate their position and improve their rank and file it would certainly not retard and might hasten the coming of the educated nurse. These hospital servant-nurses could then become what their lack of education limits them to—excellent ward maids and orderlies, and, with an educated class of gentlewomen introduced as nurses, and the sisters left in charge of the housekeeping, which they do so well, the hospitals of Italy would rank with those of any country.

#### THE NEW POLYCLINIC HOSPITAL IN ROME

Rome has just completed a truly magnificent and model hospital, to accommodate twelve hundred patients and to unite in one all of the various clinics for the students of medicine which are now scattered over the city. It was not yet ready for the reception of patients in February, when we visited it, but was practically complete.

It is built according to the very latest dictates of science, and is not only hundreds of years ahead of everything else in Italy, but probably ranks with the few most complete and perfect hospitals in construction, sanitation, and practical detail. We know too that it will have medical science second to none, but the thought of the nursing it will probably have makes one sad, as one examines



the beautiful details and imagines the mussy slovenliness that will most likely prevail in the wards, for no suggestion of establishing a training-school suitable for this beautiful hospital had been made in the history and description of the hospital printed lately. It was projected in 1874 by Guido Baccelli, a minister of the government, and was begun in 1888.

The wards are situated, like the Johns Hopkins's, in the upper part of single pavilions, connected by corridors. The latter are three-storied, one underground being for service, the travel of food-carts, drug supplies, etc., the ground floor for the passage of the public, and the second floor for the patients. The main kitchen is in the centre of the general plan, and is fitted up with steam cookers of the latest German manufacture. The brass cookers are all suspended on a steel and iron circle in the middle of the room. Nothing touches the floor except the iron stoves with charcoal fires for broiling small meat, and the coffee-roaster with its charcoal bed, over which the coffee beans are hung in a revolving brass globe with an outer protecting shell, and the stove with its spit turned by a pulley-wheel, for roasting large meat over a charcoal fire, under a closed top and chimney hood. There is a very complete system of baths. Besides the small ordinary porcelain tubs for each ward there are special baths, alike for men and women. Of these, one is a deep marble pool, sunken in the floor, so that one goes up two marble steps and down five or six. It can give a complete immersion up to the neck, and is almost big enough to swim in. Then there are sitz-baths with spray douches—rectal, vaginal, spinal, and diaphragmatic. Either one or all of these at once can be given.

There is a skeleton bath, like a set of ribs, continued to the floor. The patient stands up in this while each rib sends forth a line of spray, and a rectal spray comes up from the floor and one from above comes down on the head. Then there are Turkish baths, ordinary sprays and showers, and a number of porcelain tubs. The mechanism for the special baths is all worked by a keyboard at one end of the room, where also there is a pressure-regulator and a thermometer to get the correct degree of heat wanted. All over the entire institution all the hot-water pipes are painted in blue, and the cold-water pipes in pink.

The wards, intended for eighteen beds, each have four small rooms as well, one of four beds and the others for a single patient, a little kitchen (and so pretty), and a small disinfecting-room of its own. This is for the first disinfection of clothing before sending to the laundry, and the disinfection apparatus, which stands in the middle of the room, first expels by means of a special extractor all the air contained in the interstices of the material, and then steams it. The soiled articles for the laundry (which is fitted up with the best steam appliances) descend through a chute into a receptacle.

The lavatories, water-closets, and slop-hoppers are very complete and convenient. A small room or closet is arranged near each ward for keeping the vessels in which are kept discharges for the physician to inspect. These vessels are placed in an iron casket which is in communication with the ventilating pipes of the drainage system. A granite bowl and drain-pipe in the same room receives these materials when they are to be thrown away. The walls of the room are faced half-way up with slabs of granite.

Details like this show that the practical details for getting work done have been very carefully thought out, and every department shows the same scientific forethought in all details, and the same perfect finish as to materials



ONE OF MISS BAXTER'S ITALIAN NURSES



used. It will be the greatest pity if it does not have a nursing service capable of appreciating it all and of keeping it in the exquisite order that it should be kept in.

## HOW TO TRAVEL ON LITTLE MONEY

(Continued from page 461)

### BAGGAGE.

ONE who wishes to travel abroad economically must establish a rigid system as to baggage. ("Luggage," the English call it most aptly, for new light shines on the word when one sees how it has to be lugged about.)

Baggage is a nuisance, however one fixes it. It is a nuisance to have baggage and it is a nuisance to have none. Those who travel with trunks have perpetual expenses and small annoyances. Those who go without have few clothes. However, the latter plan is more conducive to happiness if one wants to see the country at small expense.

There are only some inconsiderable districts in Northern Europe where one is allowed by the railroads enough free baggage to carry a trunk on one's ticket as we do at home. Almost everywhere trunks or boxes which are not carried in the hand are charged for by weight: at every starting-point they must be weighed and paid for, and this cost counts up quite alarmingly, even for small trunks, besides being a trouble. Then, as to hand-bags, if one has several, or large, heavy ones, it is not always possible to carry them oneself. The porters at the stations must help to carry them, and each time that a bag is picked up by a porter, if it is only for a few steps, he must be paid two or three cents for each article, and these little items count up, especially when one gets in and out of cars, boats, cabs, etc., a number of times in a day.

Therefore, clothing and belongings must be carefully planned on a small and simple basis, and it is surprising to see with what a small amount of baggage an experienced traveller can be comfortable and look respectable.

The economical traveller starts out with a simple, short, tailor-made or home-made dress of tweed or serge, of a color suitable for winter and summer, and with a coat to match. As hats take up room, none need be taken except on the head. It should therefore be simple and unpretending. A judicious variety of blouses—one of flannel, one or two of silk, and a couple of wash material—will give the needed change to the toilet. Then an extra wrap is always needed, and for rainy countries a waterproof of some kind. One lighter-weight dress skirt can easily be carried, even with hand baggage, to put on in the house.

No great supply of underclothing need be carried about, for laundering can always be done on short notice and is cheap. (It is not always fine laundering, so underclothes should be plain.) Worn-out garments can always be easily replaced. To be sure, one may argue that it costs less to take one's whole supply and pay the porter than to buy new ones here and there. For long stay, when one spends considerable time in one place, this holds good, but for continuous moving about and steady travel it is usually thought best to carry a light outfit and replace what is necessary. It is easier and pleasanter every way to be only lightly weighted with hand baggage; one can get in and out of cars more expeditiously, get settled more quickly and easily, and be much more independent of porters and cabmen. Cabs are cheap, to be sure, but street-cars are cheaper,

and I have seen travellers take everything needed for a three-weeks' jaunt in a bag which they could easily carry themselves.

For longer trips each person could carry one small grip or roll, and pack their other things into one or two larger bags, which could be given to the porter.

When it is necessary to take a trunk, this should be small and of convenient shape. It need not go everywhere the traveller goes, like Mary's little lamb, but can meet her at points where she intends to make a stay. All the railroads send trunks as slow freight, as well as by express, and the former is the cheapest way of getting a trunk about. It really costs very little (depending somewhat on the weight), and storage is only twenty-five cents a month. If one understands the language, one can attend to freighting the trunk oneself; however, as one must pay a cab to take her trunk to the station, it is just as cheap to have one of the transfer companies, of which there are several, do it, as they call for the trunk and deliver it.

So, then, with a trunk sent about by slow freight to meet one for prolonged stay, with a light-weight hand-bag which one can carry easily, and with the pieces which must be given to the porter as few in number as possible, the problem of baggage is reduced to its simplest terms.

#### LETTER

IN Rome and Naples I visited some of the dispensaries, as we call them, or "ambulatoria," as the Italian name is, for children. A number of these are entirely supported by private societies and individuals. In Rome Signora Celli goes three times a week to spend the day working in one of these dispensaries, where also one or two other volunteers go regularly to assist in making dressings, etc. A couple of nurses are engaged on the staff, and Signora Celli, being a graduate nurse, has general oversight. Several physicians are appointed, who attend every day, and a general clinic is held, all kinds of cases being treated. There is a bath, where the children can be bathed. Milk is also prepared under the physicians' directions and given to the mothers in certain cases, and they are instructed in the principles of feeding the children. (However, I have not seen any such complete plant for distributing milk for children, pasteurised or prepared according to special formulas, as those in Baltimore and New York under the Wilson Sanitarium management in the former, and the Good Samaritan Dispensary and Straus milk stations in the latter, but it would not be fair to compare with them these "ambulatoria," which are on a much smaller scale.)

There are also several beds for children who need to be kept for several days, and a nurse to take charge of them. The whole thing is established in an old convent which answers very well indeed for the purpose, and is situated in one of the poorest parts of Rome. It has a large service. There are five of these private ambulatoria for children in Rome, and all the money is raised by private endeavor. The American nurses in Rome told me that they often make bandages and dressings for this purpose when they are home from cases.

The one in Naples is quite unique, and could be so easily imitated that every settlement and district nursing centre at home ought to establish one. It does not take a general service, but specializes on rachitic children. The cases are selected by a physician and treated as long as he orders, then dismissed by him when proper to do so. He is not there every day, but comes at fixed periods.

The treatment consists of a daily bath, rubbing, cod-liver oil, and a meal of hot bread and milk, and it is wonderful to see the improvement in these cases.

One of Miss Baxter's graduate nurses is in charge of this work, with a couple of assistants. They have a suite of rooms fitted up for the work, with bathroom, kitchen, and a large waiting-room very cannily arranged, so that the mothers can help without being in the way. The mothers undress their own children, and hand them in turn through a large window opening into the bathroom. After the bath and rub are given the children are handed back through the window to the mothers, who dress them again. In this way the work can be put through very expeditiously. The bath is ordered by the physician. Some cases get plain and some salt hot baths. After all the baths are given the children are placed at a table and get first their prescribed dose of cod-liver oil or emulsion, and then their bowls of hot bread and milk.

The results are most satisfactory, and the nurses are enthusiastic over the work. The number of cases taken is limited by the money in hand, usually from fifteen to twenty-five cases in a day. With a larger income the society could enlarge its work greatly, as there is great demand among the poor mothers for this treatment, and many cases have to be put off.

L. L. D.



CONCERNING THE ETIOLOGY OF PERTUSSIS.—The *Interstate Medical Journal* says: "Reyher (*Jaarbuch für Kinderheilk.*, October, 1903) reviews the literature and reports the results of his investigations concerning the specific etiologic factor of whooping-cough. He is able to confirm the claim of Czapliewske (made in 1897) that the specific germ is a small, non-motile, short rod, with egg-shaped rounded ends, which, morphologically as well as tinctorially, somewhat resembles the influenza bacillus. Distinct differences in cultural growth, as well as in staining properties, serve to differentiate it from this germ, however."

HOW A PULLMAN CAR IS CLEANED.—The *New York Sun*, quoted by the *Medical Record*, says: "The management of the Pullman Company, in controversy of the recent criticisms of the sanitary condition of their cars, has sent out this statement of just what the process of cleaning a Pullman car is: As soon as a Pullman car arrives at its destination it is entirely stripped, the carpets are beaten and aired, and the interior of the car is thoroughly scrubbed with soap and water. The blankets are taken out of the car and are thoroughly blown out with compressed air at a ninety-pound pressure. It is impracticable to wash them after every trip, but they go to the laundry several times a year, which is oftener than is the case with hotel blankets. All linen is renewed each trip. Every case of sickness in a car, however trivial, is followed by the antiseptic cleansing of the section occupied by the sick person, and the entire car is sprayed with formaldehyde. As a further sanitary precaution, in the newer cars of the company purely decorative draperies are being omitted, and the necessary ones, such as berth curtains, are being made of a lighter material which does not hold dust or odors."



## CHANGES IN THE ARMY NURSE CORPS



### CHANGES IN THE ARMY NURSE CORPS RECORDED IN THE SURGEON-GENERAL'S OFFICE FOR THE MONTH ENDING MAY 11, 1904.

ANZI, ROSE E., transferred from the First Reserve Hospital, Manila, P. I., to the Base Hospital, Iloilo.

Call, Sylvia, transferred from the First Reserve, Manila, to duty on the Sheridan en route to the United States. Arrived in San Francisco April 15 and assigned to duty at the General Hospital, Presidio.

Fiahtorn, Harriet, graduate of the Polyclinic Hospital, Chicago, appointed and assigned to duty at the General Hospital, Presidio, San Francisco.

Flick, Lucile E. S., transferred from the First Reserve, Manila, to duty on the Kilpatrick en route to the United States via the Suez. Sailed March 26.

Harris, Margaret, graduate of the Jefferson Hospital, Philadelphia, appointed and assigned to duty at the General Hospital, Presidio, San Francisco.

Hine, M. Estelle, transferred from the Hospital Corps School of Instruction, Fort McDowell, Angel Island, Cal., to the General Hospital, Presidio, San Francisco.

Humphrey, Mary, graduate of the Episcopal Hospital, Philadelphia, appointed and assigned to duty at the General Hospital, Presidio, San Francisco.

Keliher, Josephine F., arrived in the Philippines March 2; on duty at the First Reserve Hospital, Manila, awaiting permanent assignment.

Kelly, Lucy S., transferred from the Convalescent Hospital, Corregidor Island, P. I., to duty on the Kilpatrick en route to the United States via the Suez. Sailed March 26.

Krauskopf, Lillian (Mrs.), transferred from the Convalescent Hospital, Corregidor Island, to the First Reserve Hospital, Manila, P. I.

McInnes, Agnes, arrived in the Philippines March 2; on duty at the First Reserve Hospital, Manila, awaiting permanent assignment.

McKelvey, Mary, transferred from Corregidor Island, P. I., to duty on Kilpatrick en route to the United States via the Suez. Sailed March 26.

McNaughton, Beatie B., discharged, to date April 27, 1904.

McRae, Henrietta, formerly on duty at the General Hospital, Presidio, San Francisco, Cal., discharged, to date April 19.

Mills, Beatie, recently on duty at the General Hospital, Presidio, San Francisco, Cal., discharged, to date April 30.

O'Brien, Helen Grace, arrived in the Philippines March 2; on duty at the First Reserve Hospital, Manila, awaiting permanent assignment.

Purcell, Bertha, graduate of the Hahnemann Hospital, Chicago, appointed and assigned to duty at the General Hospital, Presidio, San Francisco.

Reynolds, Katharine E., transferred from the Convalescent Hospital, Corregidor Island, P. I., to the Base Hospital, Iloilo.

**Rohlf, Louise**, arrived in the Philippines March 2; on duty at the First Reserve Hospital, awaiting permanent assignment.

**Salter, Mrs. Marguerite**, transferred from duty as chief nurse at the Convalescent Hospital, Corregidor Island, P. I., to duty on the Kilpatrick en route to the United States via the Suez. Sailed March 26.

**Sweet, Agnes**, discharged, to date April 23.

**Van Derhoef, Ida E.**, transferred from the First Reserve Hospital, Manila, P. I., to duty on the Sheridan en route to the United States. Arrived in San Francisco April 15 and assigned to duty at the General Hospital, Presidio.

**Verdin, Clara A.**, arrived in the Philippines March 2; on duty at the First Reserve Hospital, Manila, awaiting permanent assignment.

**Woods, Julia**, transferred from the First Reserve Hospital, Manila, P. I., to duty on the Kilpatrick en route to the United States via the Suez. Sailed March 26.

**Ziegler, Barbara**, arrived in the Philippines March 2; on duty at the First Reserve Hospital, Manila, P. I., awaiting permanent assignment.



## LETTERS TO THE EDITOR



*[The Editor is not responsible for opinions expressed in this Department.]*

### REGISTRATION IN NEW YORK

CERTIFICATES of registration are now being issued from the Regents' office at Albany, and the practical working out of the law is causing some excitement among those nurses who are not familiar with, or do not understand, the New York bill.

The most important feature about the New York law is that the training-school from which a nurse has graduated must conform to-day to the standards approved by the Regents before the graduate, no matter of how many years ago, can be registered. Schools from every State in the country can register. Many have done so, and applications are being received every day. It costs nothing and it gives the school and its graduates a standing that they have never had before.

Many schools that could not conform when the law was passed have improved their course to conform to the New York requirements—schools even as far away as San Francisco and Chicago. In this way the New York law is improving the standard of education for nurses all over the United States. There is a great desire being shown on the part of training-schools to make changes that are necessary in order to be registered in New York State, and there is still a year and a half in which those schools that cannot conform to-day can change their course of training. It does not have to be done in an hour.

Nurses who have applied for registration and who have been refused because their schools are not registered are naturally very much disturbed. It is not time yet to get excited. Perhaps the school has not been sufficiently interested to apply for registration, or it may need to make only very slight changes in its curriculum to be able to do so, and will come into line in a few months. Hospitals must be given time to meet such changes.

The thing to do when a nurse finds her application rejected because of the standing of her school is not to rail at the Board of Nurse Examiners, but to investigate the kind of training that the school is now giving its pupils. A training-school that cannot conform to the simple requirements of the Regents is, for these days, a pretty poor school, and its graduates can assist greatly in the work of elevating the standard of education in that school by insisting that the curriculum be improved and the school registered in New York State, so that they can be recognized and registered.

This is the way the law works in all the other professions. It is a great work, in which everyone can help, but we must all pull together. This is an unofficial communication—an effort to make the situation clearer.

SOPHIA F. PALMER,

President Nurse Board of Examiners, New York State.

## THE PORTLAND CONFERENCE OF VISITING NURSES

DEAR EDITOR: The programme of the Portland conference is found in another column of this issue of the JOURNAL, accompanied by all necessary information for those who intend to be present on this important occasion. I cannot resist the opportunity, however, of adding a further word with the hope that it may perhaps enlist the attention of some who have not yet taken in fully what the Portland Conference of Charities and Corrections means to nurses.

The general conference will be preceded by two meetings specially arranged by request for the purpose of bringing together district and visiting nurses. It will form in reality the first conference ever held by this rapidly growing body of social workers; for while we speak of the work as visiting nursing, and in that term is implied only the care of the sick in their homes, what is of paramount importance in this work is not only the care of the sick, but the absolute necessity for considering and caring for the surroundings of the sick. The relation of the patient to his surroundings is the real point often upon which the whole matter rests, and to them, to their needs, possibilities, and resources in every direction, the true spirit of nursing should be extended and its wisest effort applied. To know just what is best to do under the difficult and varying conditions which surround the sick in their homes, so that the actual nursing care may not be wasted effort, is a subject large enough to occupy a great many great people the better part of their lives. Except in one or two instances the subject is not even considered in the work of training-schools, and at its best can merely be touched upon there, yet every district and visiting worker who thoroughly understands what she is about, and is anxious to take full advantage of her opportunities for social usefulness,—opportunities which I do not hesitate to say are unparalleled in the field of such effort,—must set herself diligently to work to study the problems of the life about her, of the poor and helpless among whom she works, of the community upon which she must depend for the final effectiveness of her labors.

Such problems may be studied in many ways: through reading, through observation, through courses of lectures and classes, and through contact with social workers in other fields. This last affords all opportunity for comparison and study of methods and seems to form an invaluable means of enlightenment, encouragement, and stimulus. It is this kind of an opportunity which the Portland conference presents to nurses, and of which I sincerely hope many will take advantage.

Such familiar names as Miss Jane Addams, Miss Julia Lathrop, Homer Folke, and Frederick Winslow are found in various places on the programme, and the subjects they handle are such as every district nurse needs to know as much about as she can find out.

The programme for the Conference of Nurses will unquestionably be interesting and instructive, but when we add to this the privilege of listening daily to the most noted social reformers of our country, the occasion becomes for us one of no ordinary significance. Yours faithfully,

ADELAIDE NUTTING,

The Johns Hopkins Hospital, Baltimore.

DEAR EDITOR: I should like to bear testimony that there is at least one subscriber to the JOURNAL who does not think that there is "too much fine print, too many pages of editorial comment, or too much foreign news."

It will be conceded, I think, that the "multitude" of nurses are in the private field engaged in practical work, gaining fresh knowledge of methods with every new case.

What we do suffer from is the want of commerce of thought with our comrades and betters, the lack of time to gather from the medical press the items of most value to us, the lack of knowledge of what the schools and societies of our great profession are doing throughout the land, and the lack of opportunity to broaden our views and sympathies by the knowledge of what our sisters in the profession are doing in other countries.

Then comes the *JOURNAL* and supplies our need, and gives us a conception of our unity in practice and purpose which we would probably never have had without it.

I always read the large print articles but, very frankly, I enjoy the fine print best, and the element of personal interest therein is not to be discounted.

For instance: here is an announcement that a friend, highly regarded but lost sight of, has sailed for Japan; that a school from which some of our dearest friends have graduated has held most interesting graduating exercises; that one friend is married and another gone abroad, not to mention the reports of the meetings of the guild and the State association, which we could not leave our patients to attend, but which we are so glad to hear about, and the notice of work in a far mission field in which we have special cause to be interested.

From our own little corner of the world the *JOURNAL* opens a vista into the larger world, and makes us a part of it and gives us a voice. Please preserve the fine print.

SUSAN BARD JOHNSON.

98 CHARLES STREET, BOSTON.

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[LETTERS to the Editor must be accompanied by the name in full and address of the writer, otherwise such communications cannot be recognized. The name need not appear in the *JOURNAL* unless so desired.—Ed.]



**THE EXAMINATION OF STOOLS FOR SOILED BODIES.**—Dr. Cross in a letter in the *Medical Record* suggests the following method of performing this process: "Take an ordinary flour-sifter with handle and wire crank, such as may be obtained at any housefurnishing store for fifteen cents. When needed, the sifter may be placed in a chamber, commode, or the bowl of a water-closet, the passage being deposited in it. It can then be set into a chamber and taken to a hopper, or where water can be allowed to run through it, at the same time the crank is turned gently. This quickly washes away the debris from the cystals, leaving only hardened material, such as gall-stones or foreign matter, in the sifter."



## EDITOR'S MISCELLANY



**PREVENTION OF BLINDNESS AT BIRTH.**—This leaflet is issued by the Massachusetts Association for Promoting the Interests of the Adult Blind, which owes thanks for information and material to Henry J. Wilson, secretary of Gardner's Trust for the Blind, London; Professor Dr. Fuchs, Vienna; Professor Dr. Axenfeld, Freiburg, Baden, and Dr. John A. Tenney, Boston:

The inflammation of the eyes of new-born infants is a contagious disease, which can only be cured if taken in time and treated with proper care under a doctor's direction. Many thousands of children have lost their sight from this cause, and it has been found in England that thirty per cent. of the pupils in schools for the blind were blinded by neglect or wrong treatment of this disease.

The following directions for treatment are most important:

1. Immediately after the birth of a baby, before doing anything else, wipe the eyelids and all around the eyes with a clean, soft, dry linen rag, and soon after wash these parts with warm water.

2. Do not expose the baby to cold air, as cold is one cause of this eye disease.

The disease can be easily known by redness, swelling, and heat of the eyelids, and by the discharge of yellowish matter from the eye. *Immediately send for a doctor, and keep the eyes as clean as possible by gently washing away the matter every fifteen minutes, both by day and night. It is the discharge of pus that does the mischief.*

The washing is done thus:

1. Hold the eyelids apart with finger and thumb, and let a gentle stream of warm water run between them from a bit of fresh rag or cotton wool held a little above.

2. Then move the eyelids softly up and down and sidewise to bring out the pus from inside, and wash it off gently.

3. *The saving of the sight depends on the greatest care and cleanliness.*

Each rag must be used only once and then burned immediately; a separate rag must be used for each eye.

4. A little vaseline or lanoline should be occasionally smeared along the lids to keep them from sticking.

5. If only one eye is diseased, the child must be laid on the side of that eye, so that the pus may not flow over the nose into the other eye.

Since the pus is highly contagious, the nurse must carefully wash her own hands after touching the diseased eyes.

The poison of the pus is far more dangerous in the eye of the adult than in the eye of the infant.

**Caution.**—Do not use any lotions or poultices without the advice of a doctor.



## EDITORIAL COMMENT



### THE ALUMNAE CONVENTION IN PHILADELPHIA

#### THE SOCIAL SIDE.

A COMBINATION of sunny skies, of balmy atmosphere, and hospitality unprecedented made the seventh annual convention of the Associated Alumnae at Philadelphia a most brilliant occasion. We are at a loss for words with which to do justice to the social side of the meeting. The old Quaker City was seen at its very best; trees and shrubs were just putting on their fresh spring garments, and beds of gay tulips and other early flowers, with the freshly filled window gardens, gave the city a gala appearance.

Very careful provision was made for the guests to see the points of historical interest in the city under the most favorable conditions, and the receptions and teas given by the different hospitals, together with the visit to Girard College, the trolley ride and supper at the Episcopal Hospital, and the superb banquet given by the nurses of Philadelphia at the Roosevelt, rounded out a week of rare pleasure.

The dinner, which was given on Friday night, was very largely attended, the banquet hall being filled to its greatest capacity, many guests having to be seated in the adjoining rooms.

Miss Goodrich, of the New York Hospital, was the toast-mistress, and her graceful and witty introductions were greatly enjoyed. The speakers were Miss McIsaac, Mrs. Robb, Miss Shaw, Miss Palmer, and Miss Russell.

It is only upon such occasions that one sees numbers of nurses free from professional care, arrayed in dainty garments, giving themselves up to the enjoyment of the hour, when the superior intelligence and poise shown in their faces is a tribute to the earnestness and discipline of the manner in which they live. Seen under such conditions, time seems to have dealt very gently with this great body of workers.

The magnificence of the banquet hall, with its brilliant decorations of crimson and white, the beauty of the flowers, the daintiness of the repast, and the inspiring music, united with the spirit of good-fellowship, with no end of fun and laughter, to make the occasion one long to be remembered.

#### THE BUSINESS MEETINGS.

The full reports of the business proceedings will be published in the July number of this JOURNAL, and will include all addresses and papers read with the discussion, and the constitution and by-laws as finally amended and adopted at this meeting. The entire July number will be used for this report, and will contain a wealth of interesting matter.

The completion of the by-laws, which have been under consideration for so long, will simplify the work of the society very much. State societies are admitted to membership with one delegate at large, thus providing a means for the affiliation of the States through the Alumnae. This is considered to be only

a temporary arrangement until such time when State organization is universal, when reorganization will again be necessary.

#### THE JOURNAL OWNERSHIP.

The question of the JOURNAL ownership by the Associated Alumnae was given very careful consideration. The majority of the associations reported unwillingness to undertake the full financial responsibility, but were in favor of buying up the stock in the JOURNAL Company now available, and gradually acquiring such shares as might from time to time be for sale. This would seem to be a judicious decision, as in this way no radical changes need be made in the present management, while the Associated Alumnae will gradually acquire a voice in the affairs of the JOURNAL, with which interest a sense of responsibility will be aroused, and as the association gains in strength and business knowledge it will be in a better position to assume the complete management of the magazine.

The question of some form of affiliation with the National Red Cross Society was referred to a committee with power to act, of which Miss M. M. Riddle was made the chairman.

The meetings, taken as a whole, were exceedingly harmonious and the delegates came much better instructed than ever before—a line of progress which promises much for the future welfare of the society, especially as the majority of the delegates were the younger women in the profession, the older women being fewer in number than usual. It was noticeable, in the election of the Board of Directors, that where the candidates were composed equally of superintendents and nurses in private practice, that a majority of those elected were superintendents, showing, we think, a disposition on the part of the members to still rely upon the leadership of the teaching body rather than assume the undivided responsibility themselves.

#### A QUESTION OF COURTESY.

The meetings closed, however, with one unfortunate episode that we feel should not pass without comment in these pages. It will be remembered that the secretary and treasurer of the association, Miss Thornton and Miss Healy, have served since the society was inaugurated eight years ago, and the work that they have done, without compensation, has been perfectly colossal, incomprehensible, perhaps, to those not actively engaged in alumnae work. The Nominating Committee in making its report did not include in the ticket the names of these two officers.

We do not question the right of the society to change its officers as often as it likes, or the privilege of delegates and members to cast their ballots for such candidates as they prefer, and we are a most hearty advocate of the American principle of government by the majority, but we think courteous consideration should be shown to "those who have been doing our work." If in the estimation of a committee the time has come for a change of officers, a more kindly way would be to put strong candidates into the field to run in opposition to them, and let it be the "voice of the people" that decides whether changes are desirable or not. As it was, so great was the feeling of indignation, nomination of both of these officers was made from the floor, and they were reflected by a large majority.

Rotation in office is desirable, and anyone may at any time reach her limit of usefulness to the society, but after accepting service from an officer for a

long term of years her rejection should be made with as little pain and humiliation as possible.

#### TO MEET IN WASHINGTON.

The meeting next year will be held in Washington, which place was decided upon after some discussion. The fact that the Superintendents' Society is to hold its next meeting in that city the coming January raised the question of the wisdom of taxing the Washington members with two large conventions the same year, but the Washington delegates pressed the matter and their invitation was finally accepted, with the understanding, however, that social functions were to be limited.

In Washington there is so much of public interest in the Government buildings—the Capitol, the White House, Mount Vernon, the National Cemetery at Arlington, etc., etc., that it would seem entirely unnecessary to provide entertainment that would tax either the time or the finances of the Washington nurses. In fact, it is time we called a halt on the elaborate and costly entertainments, that have increased in late years, both in number and lavishness, for although so delightful to the visiting members, we know such entertaining must be a great tax upon the members whose guests they are, and there is no more fitting place to commence such retrenchment than at the National Capital.

#### OUR DANGER IN POLITICS

In the last number of the *JOURNAL* mention was made in this department of the political pitfalls, which seemed to be increasing in number and character in different sections of the country. Since the publication of that issue the New York State Nurses' Association has held its annual meeting, and a circumstance in connection with it is of too serious import to be allowed to pass without condemnation.

Mention has been made in the *JOURNAL* from time to time of the organization of the New York County Registered Nurses' Association. New York City has needed for many years a large general nursing club of some kind that would bring the graduates of all the schools together to deal with problems of local interest, which would result, naturally, in the breaking down of school lines, the existence of which in any city is an obstruction to professional development.

This New York County Association is a progressive step, but we were greatly disappointed when we found that instead of a society composed of many hundreds of individual nurses, it was in reality only an affiliation of the alumni associations and clubs already existing, with individual members as well—a duplicate in form of the State society.

In the formation of State or national organizations, to facilitate the transaction of business and from motives of economy, it is necessary that the members should be delegates from organizations, county societies and alumni associations being the form most familiar, but these local organizations usually represent individual membership.

New York City nurses claim that because of its great size and the large number of nurses located within its borders individual membership alone would be impossible, and that representation from the existing organizations is the only plan upon which a county society could be formed.

A very ingenious arrangement was devised by which the alumni associations, having withdrawn from direct membership in the State society, were to nominate

their own delegates to the State meetings, to attend, however, as delegates from the county society, and in this way retaining their individuality in dealing with State problems. This plan seemed to contain nothing in any way injurious to the State work. It was, therefore, something of a surprise to many members of the State society, as well as to those watching the broad organization movement throughout the country, that after having been accepted into membership in the State society the county association presented one delegate carrying seventy-nine votes, representing its enormous constituency of seven hundred and ninety members, at the annual meeting in Albany.

Fortunately, the by-laws being under consideration, an amendment was proposed and carried limiting the constituency which any delegate should represent to one hundred nurses; in other words, that no delegate from any organization represented in the State Society should carry more than ten votes to a meeting. With such a constituency as the New York County Association expects to have, of at least a thousand nurses affiliated, with one delegate carrying one hundred votes, every problem which would be presented for consideration, every motion that would be made, would be controlled absolutely by the New York County organization.

This danger has been averted for the time being. Our criticism is not of what was done, but of the spirit which was shown by the leaders being willing to adopt a plan which might, in the hands of an unprincipled administration, dominate and control the affairs of the State. We cannot believe, knowing the women whose names are associated with this movement, that a desire to dominate was the motive; it would seem to have been more from reason of convenience and economy.

The explanation is made by one of the most active promoters of the county organization that many of the affiliated societies did not elect their delegates, and that this decision to be represented by one delegate was intended as a temporary arrangement for "official purposes" only.

We think it would not be possible to find one hundred women in any city who could be induced to see any one subject from the same point of view, even if they were sent as delegates from the same society, unless they were organized into a complete political "ring," but one delegate carrying one hundred votes would have the controlling voice in every measure voted upon and would make any society organized upon such lines a menace to the organization work, not only of the State but of the entire country.

If the action of the New York County Society was the result of thoughtlessness or from the lack of appreciation of its responsibility to the State, we repeat, the principle is equally bad, and should be condemned and resisted as threatening a kind of political monopoly disastrous in its consequences.

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#### TO NEW YORK STATE NURSES

MUCH consternation is being felt by those nurses who have applied for registration under the Regents, and have been informed by the office at Albany that they cannot be recognized because the school from which they have graduated has not been approved by the Examiners. In most cases this is not cause for alarm. Many schools have not taken the trouble to apply for registration. Some have been rejected because of their inability to comply with some one of the requirements, but will be recognized if they do comply before January, 1908,

when the graduates will be given recognition. Remember, this is what our bill calls for, the approval of the training-school as maintaining proper standards before the graduates can be registered. It is one thing on paper and quite another matter when we feel the practical result. It is only in this way that a uniform minimum standard of education can be established. Just don't get excited, but when you find that your school is not eligible demand of the managers of the school the reason why, and insist that the school conforms to the simple, practical standards of education demanded. In this way you will be helping the Board of Examiners, whose effort is to carry out the letter of the law which you have helped to pass. There is plenty of time for such adjustment. No one supposed it would be all smooth sailing, for if there had not been irregularities we would not have needed protection. Schools from all over the world are registered with the Regents; it costs nothing, and such registration gives recognition to the graduates. Insist that your school comply with the requirements and is registered. This is work for your alumni association. Miss Palmer's letter on page 740 may make the situation clearer to some, and a full report of the progress of registration may be looked for in August.

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#### THE CONFERENCE OF VISITING NURSES

We wish to call the attention of our readers who are especially interested in the work of visiting nurses to Miss Hitchcock's announcement in the Official Department of the programme of the Portland conference, and to Miss Nutting's letter on the same subject.

These two communications leave nothing further for us to say more than to emphasize the fact that there is wonderful inspiration and help to be obtained from such conferences, where one meets those engaged in the same line of work as ourselves. We would say to visiting nurses generally, attend this conference if you possibly can.

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#### MISS SAMUEL'S PAPER

Miss SAMUEL has given in this number a very attractive account of "Stony Wold," and her suggestion that provision be made at this mountain resort for members of our profession who have fallen the unfortunate victims to tuberculosis is one that should be seriously considered by our readers. The committee forming in New York City is composed of reliable women, and Miss Samuel will be very glad to give further information in regard to the details of the plan.





SEVENTH ANNUAL CONVENTION

OF THE

Nurses' Associated Alumnae  
of the United States

HELD IN

DREXEL INSTITUTE

PHILADELPHIA, PA.

May 12, 13, and 14, 1904



MINUTES OF THE PROCEEDINGS

*July 1904*



## HONORARY MEMBERS

FLORENCE NIGHTINGALE (elected into the association in 1889).  
MRS. W. BAYARD CUTTING (elected into the association in 1900).  
MRS. WINTHROP COWDIN (elected into the association in 1899).  
MRS. WHITELAW REID (elected into the association in 1899).

## OFFICERS FOR 1904

### President.

MISS MARY M. RIDDLE, Newton Hospital, Newton Lower Falls, Mass.

### First Vice-President.

MISS ANNIE DANER, Out-Patient Department, Bellevue Hospital, New York.

### Second Vice-President.

MISS MARGARET M. WHITAKER, 1003 Green Street, Philadelphia, Pa.

### Treasurer.

MISS TANAR E. HEALY, 100 Joralemon Street, Brooklyn, N. Y.

### Secretary.

MISS MARY E. THORNTON, 120 East Thirty-first Street, New York City, N. Y.

## BOARD OF DIRECTORS

### For three years.

MISS ISABEL McISAAC,

MISS M. A. NUTTING.

### For two years.

MISS PAULINE L. DOLLIVER,

MISS M. E. SMITH.

### For one year.

MISS ANNIE W. GOODRICH,

MISS NELLIE M. CAREY.

## COMMITTEES

### Nominating Committee.

MISS CAROLINE J. MILNE,

MRS. HARRIET HOBBS,

MISS SARA A. BOWEN,

MISS S. H. CABANER,

MISS RUDDEN.

### Committee on Arrangements.

MISS NEVINS, Chairman, The Garfield Memorial Hospital, Washington, D. C.

### Committee on Ways and Means for Acquiring Journal.

MISS DANER,

MISS FREDERICK,

MISS GOODRICH,

MRS. ROSS,

MISS GREENLEA.

## STANDING COMMITTEES

(To be appointed.)

Eligibility—  
Programme—  
Publication—

### Census Committee.

MISS A. J. GREENLEA, Chairman.

# Delegates Registered

June 12, 1904

TRAINING-SCHOOL ALUMNE OF THE	
Allegheny General .....	Miss NELL F. PARRISH (2 votes).
Augustana, Chicago .....	" HILMA O. JOHNSON.
Baltimore City .....	" SARA WARD.
Bellevue, New York .....	Mrs. MARY BOHLING.
	Miss ANNIE DAMER.
	" MARY C. MARKHAM.
	" ANNIE RHODES.
	" SARA A. BOWEN.
	" ELIZABETH C. FAIRBANK.
	" EMMA J. JONES.
	" M. EVA MOORE.
	" JULIA E. REED.
	" H. JOSEPHINE SHEPHERD.
Boston City .....	" ESTHER DART.
	" ANNIE A. HINTZE (4 votes).
	" ELIZABETH DEWEY.
	" MATILDA HOLLIS.
	" ESTHER J. McLURE.
Boston and Massachusetts General .....	
Brooklyn .....	" PERON E. JENNINGS.
Brooklyn Homoeopathic .....	Mrs. GUSTIN WELCH.
Buffalo General .....	Miss EMILY A. McLAUGHLIN.
Chicago Baptist .....	" ROSE SMITH.
Children's, San Francisco .....	Mrs. SARA L. FLEETWOOD.
Columbia and Children's, Washington .....	Miss MINNIE PAXTON.
Erie County, Buffalo .....	" EMMA DUENSING.
Farmard, Detroit .....	Mrs. HARRIET L. O'DONNELL.
Freedmen's, Washington .....	Miss JESSIE LENNOX.
Garfield Memorial, Washington .....	Mrs. HARRIET HIGBEE (1 proxy vote).
German, New York .....	Miss LOUZETTA E. CORNISH.
Germantown, Philadelphia .....	" HANNAH L. RUSSELL (2 votes).
Grace, Detroit .....	" ALICE M. McCULLY.
Hahnemann, Chicago .....	" EDITH W. SEYMOUR.
Hahnemann, Philadelphia .....	
Hartford .....	" MINNIE H. ABRENS.
Hops, Fort Wayne .....	" GRACE E. BAKER.
Hospital of the Good Shepherd, Syracuse .....	Mrs. HARRIET HIGBEE.
House of Mercy, Pittsfield .....	Miss HELEN W. KELLY.
	" MATHILD KRUGER.
	" MARY C. WHEELER.
	" REBECCA B. HALSEY.
	" ANNA M. FRENCH.
	" EDITH MADEIRA.
	" M. GRACE O'BRYAN.
	" GEORGINA ROSS.
	" MARY A. NUTTING (2 proxy votes).
	" MARGARET BRENNAN.
Illinois, Chicago .....	
	" ANNA DAVIDS.
	" LUCY M. SARGENT (3 votes).
	" LILLIAN BROWN.
	" SALLY LUCAS JEAN.
	" JENNIE A. BREED.
	" JENNIE CHADBOURNE.
	" HELEN W. KELLY (1 proxy vote).
	" LILLIAN L. WATERMAN.
	" WILHELMINA MURRAY.
	" MINNIE FAY.
Jewish, Philadelphia .....	
Johns Hopkins, Baltimore .....	
Kings County, Brooklyn .....	
Lakeside, Chicago .....	
Lakeside, Cleveland .....	
Long Island College, Brooklyn .....	
Maine General, Portland .....	
Maryland Homoeopathic, Baltimore .....	
Massachusetts Homoeopathic, Boston .....	
Mary, Chicago .....	
Methodist Episcopal, Brooklyn .....	
Michael Rees, Chicago .....	

## 752      *Seventh Annual Convention Nurses' Associated Alumnae*

### TRAINING-SCHOOL ALUMNAE OF THE

Mt. Sinai, New York .....	Miss JENNIE GREENTHAL (2 votes).
Newton .....	" THEODORA CHASE.
New England, Roxbury .....	Mrs. MARY C. HALL (2 votes).
New Haven .....	" IRABELLA A. WILCOX.
New York .....	{ " MATILDA A. FREDERICK.
	" ANNE W. GOODRICH.
	" MARTHA M. RUSSELL.
	" MARY A. SAMUEL.
	" ALICE I. TWITCHELL.
New York City .....	{ " ELLA V. BURR.
	" J. AMANDA SILVER.
	" IRENE B. YOCUM (4 votes).
New York Post-Graduate .....	{ " SARAH J. GRAHAM.
	" JANE E. VAN ZANDT (3 votes).
Old Dominion .....	" A. GULLY.
Orange Memorial .....	{ " JANET M. HOULDEN.
	" CORA H. SWAN.
Paterson General .....	
Pennsylvania, Philadelphia .....	{ " LAURA J. ALLEN.
	" ALICE J. MOONEY (3 votes).
Philadelphia .....	{ " MOLLIE HALLOY.
	" WARMOUTH.
Pittsburg Homoeopathic .....	Miss WILHELMINA DUNCAN.
Presbyterian, New York .....	" IDA F. GILES.
Presbyterian, Philadelphia .....	{ " JENNIE A. ALLEN.
	" MARGARET A. BEWLEY (3 votes).
Protestant Episcopal, Philadelphia .....	{ " CAROLINE J. MILNE.
	" LILLIE L. WARDELL.
Provident, Chicago .....	" REBECCA JACKSON.
Reading .....	" GEORGIANNA KITCHEN.
Rhode Island, Providence .....	{ " FANNY C. BOHLING.
	" CONSTANCE V. CURTIS.
Rochester .....	" MARY C. FALCONER.
Rochester Homoeopathic .....	" MARIETTA C. GARDINER.
Roosevelt, New York .....	" MARIE E. FHELAN (2 votes).
Ruham .....	" JULIA E. BAILEY.
St. Joseph's, Chicago .....	" GRACE ARNOLD KNIGHT.
St. Joseph's, Paterson .....	" MARY B. SYMONDS.
St. Luke's, Chicago .....	" SUSAN CROWE.
St. Luke's, New Bedford .....	{ " HELEN BALCOM.
St. Luke's, New York .....	" MARY JANE MCCOY.
	" ELLEN STEWART.
St. Luke's, St. Paul .....	" LEONILDA F. LOWRY (proxy vote).
St. Luke's, South Bethlehem .....	" MARY E. SMITH.
St. Mary's, Brooklyn .....	" REBECCA B. TOUPET.
Toledo .....	
Union Protestant Infirmary, Baltimore .....	" SUSAN G. PARISH.
University of Maryland, Baltimore .....	" MARGARET MCCARTHY.
University of Michigan, Ann Arbor .....	" KATHARINE MAPER.
University of Pennsylvania, Philadelphia .....	" GRACE L. DUNDERDALE.
Virginia, Richmond .....	{ " MARTHA E. BROBSON.
Western Pennsylvania, Pittsburg .....	" CAROLYN T. DUNN.
Wilkes-Barre .....	" LYDIA A. GIBERSON.
Worcester City .....	" AGNES D. RANDOLPH.
	" ELLEN M. HUNT.
	" MARTIE B. GUY.
	" R. L. CAMERON.
	" RACHAEL A. METCALFE.

### ASSOCIATE MEMBERS

#### TRAINING-SCHOOL ALUMNAE OF THE

Faxon, Union .....	Miss ANNA H. WETHERILL.
Methodist Episcopal, Philadelphia .....	" JEAN W. NELSON.
North Adams .....	

Total, 50 Societies: 108 Delegates; 115 votes. Proxy votes, 5.

# THE PROCEEDINGS OF THE SEVENTH ANNUAL CONVENTION

PHILADELPHIA, MAY 12, 13, AND 14, 1904

*First Day, Thursday, May 12, 1904.*

One P.M.—Presentation of credentials, registration of delegates, and payment of annual dues.

At three o'clock the president took the chair, saying: "The hour has now arrived when we should begin our meeting. We will open this, the Seventh Annual Convention, with prayer by the Rt. Rev. O. W. Whitaker, Bishop of the Diocese of Pennsylvania.

Invocation. The RT. REV. O. W. WHITAKER.

PRESIDENT.—We are unfortunate in not being able to present to you Dr. MacAllister, who was to welcome us to Drexel Institute this afternoon, but on account of illness he is absent. I therefore ask Miss Whitaker, chairman of the Committee on Arrangements, to give us a few words of greeting from Dr. MacAllister.

MISS WHITAKER.—I am very sorry to say that Dr. MacAllister has been very ill for several weeks, and he has requested me to say that he regrets exceedingly that he is not able to be here for the opening of this convention this afternoon, and he bids me tell you that you are most heartily welcome to Drexel Institute and that he will do all in his power to make your visit here a pleasant one. Through the courtesy of Dr. MacAllister, the trustees of the institute have given us the use of this building for our three days' convention, and the picture gallery and the museum will be open for your inspection.

ADDRESS—MISS MARY M. RIDDLE, PRESIDENT.

"It gives me very great pleasure to again open your convention.

"At this, our seventh annual meeting, we hope to redeem our obligations to our profession in *general*, and in *particular* to that great body we represent, the Nurses' Associated Alumnae of the United States.

"We are here assembled to renew our acquaintance with one another and to welcome the new associations that have joined our ranks since last we convened, and as we extend to them the right hand in greeting, we do not hesitate to offer a portion of the work we bear in the other hand.

"Many problems call for our earnest and thoughtful deliberation, and judging from the audience before me, I conclude that the local alumnae societies realized this and sent a full representation to attend to the work before us.

"May we spend our time wisely, may prudence dictate our decisions, and may success crown our efforts.

"If we bring to bear upon our unsolved problems a harmony of spirit, a unity of purpose, a concentration of attention, a willingness for details, and a painstaking perseverance to the end, our success is well-nigh assured.

"We have rejoiced year after year in the praises that have been bestowed so freely upon us; we have been proudly conscious of our achievements, and perhaps with some slight reason, but a time has now come when we cannot afford to relax our efforts, when to spend the moments in congratulations may lose to us the chance for much that is before us.

"The times are ripe. Never had we such opportunities for the fulfilment of a high destiny. Never before was it so perfectly evident to members of the nursing profession that we must work out our own salvation, that we must work it out to certain ends, that we must control the currents or be controlled by them. Never before has there been such need of concerted action; never a time when necessity so loudly demanded that we should stand close together. Then let us close up, and so surround our common enemies—prejudice and ignorance—as to completely vanquish them.

"Doubtless there will come retrogressions, as there have come to some of us during the year in our efforts for State registration; such obstacles will not, however, be allowed to stop progress, but rather be a stimulation to new activities.

"Perhaps the question now most thoroughly enlisting the attention of nurses all over the land is that of registration by the State. The manner of its accomplishment in the various States depends upon the laws and customs of those States.

"It is difficult in one State because the Executive fears to sanction the law lest it give too much power to a body of women; it is restrained in another by reason of the jealousy of a commission, created for a wholly different purpose, that sees in the passage of the nurses' bill an opportunity for widening its own sphere, and sees it so plainly as to have an influence with legislators and cause grave fears among the nurses that their bill might become a law, and that they might be placed under a commission which would render their position in the State much less desirable than before. So grave were the fears of those nurses that a small, self-constituted committee sought an interview with his Excellency the Governor and expressed to him the hope that he would kindly veto their bill if it were presented to him during the present session of the Legislature, with the result that that bill is laid over until another year. Thus might be repeated instances of



struggles, successes, and defeats wherever nurses are working for State registration, but we hope you will have presented to you reports of the progress made by the State associations, and these instances serve to illustrate and prove the need for work by everyone.

"It would seem that the time for advocating the necessity for State registration has passed; but evidently it has not, or every nurse in the United States would be found working for it. Realizing this fact, your Executive Committee decided to devote a large part of the programme of this convention to that subject; and therefore you will have its principles presented to you from points of view both old and new, all of which you are urged to earnestly consider, judiciously weigh, and conscientiously practise in your homes during the coming year. We hope you will be told how best to secure legislation; but if you are not, you can at least make your own deduction from the reports of State associations. We trust you may hear something of the progress of the preliminary course for nurses as inaugurated by other educational institutions. The preliminary course has had its advocates in several of these conventions, and we know that it continues to interest many of our members, but the rate of progress has not been greatly accelerated during the past year largely because managers of technical schools and those advocating the course from the nurses' standpoint fail to meet on common ground. Doubtless concessions will have to be made by both before much can be accomplished. Something has been done by way of demonstrating to one woman's college that the nurses are fully aware of their needs and that no one outside the profession can possibly know those needs or dictate them as well as they.

"Patient, persistent effort has been made and must continue to be made if the hoped-for results are to be attained, and in no way at the present time can our perseverance be better shown than by a constant demand for this part of a curriculum for nurses.

"When we consider what has been accomplished by a few women of our own profession, when we note the success that has been attained in certain lines of work, we grow hopeful and are ready to say, 'If no school or college is willing to take this up for us, why should we not take it up for ourselves?' Is it too much to expect of us? Would it be so much more difficult than what has already been done? Are you prepared to give your earnest thought to it? At least, are you ready to select those who will study the possibilities of such a departure from the old, familiar ways? The time has now come when even the most conservative of our training-schools are ready to coöperate with any scheme which promises them better material as pupils, and if State registration does all that its friends hope it will do, they will of necessity be found even more willing to coöperate.



"It may sound wild and chimerical, but not when viewed by the light of the history of nursing in this country for the last ten years, during which time one experience has crowded upon another with great rapidity, as witness the growth of this very association, the institution of the course for nurses at Columbia College, the establishment of State registration for nurses in many States, the success of that enterprise especially dear to every alumna—THE AMERICAN JOURNAL OF NURSING.

"We can take with us into our consideration of the question this fact—that in the material things of life those who have conquered have always been they who have ventured into the unknown. Of one thing we may be sure—the preliminary course for nurses is bound to be established sooner or later, and if we do it ourselves, we believe it will be well done.

"A very real indication of the trend of public opinion towards the importance of the nurse's work is found in the prominence given it wherever philanthropic or social workers meet in council, an illustration of which will be seen when the National Conference of Charities and Correction is held in Portland during the week of June 15 and gives a large part of its time and programme to the work of the visiting and district nurses; and this is given to the nurses themselves, the practical workers, and not, as is often the case, to the managers, or those who merely support the work by their contributions of money.

"We shall also have another fine illustration of this fact when the International Council of Women meets in Berlin next month for the consideration of ways and means for the betterment of humanity, and gives largely of its time and space to questions which pertain to the work of the nurse. Loyal, energetic women all over the world are thus banded together for the promotion of the common weal. The very contemplation of the idea is an incentive to all to gird on the armor a little more securely, for in such work we delight to have a place. The Empress of Germany has graciously consented to be the honorary chairman of the congress, and together with other members of the royal household will attend the meetings and otherwise show her sympathy for the work and workers.

"We, through our membership in the American Federation of Nurses, belong to the National Council of Women and thus to the International Council. We are to be represented in the congress in Berlin, where energy of mind, genius, power, will speak in many tongues which the world will hear and heed.

"It will be our pleasure later, in convention assembled, to send to them some greeting, not merely that our delegate may have a more salutary introduction, but because we wish to show our sympathy for

that great body of women, 'endeavoring to comprehend in all its magnitude, and to feel in all its importance, the part assigned to them in the great drama of human affairs.'

"That they may arrive at conclusions which shall formulate plans for the continued betterment of mankind is our earnest hope and sincere belief; for they, by their works and influence upon affairs,—local, national, and international,—have gained a vantage-ground from whence success must be eventually won.

"As a convention we have among the obligations devolving upon us that of reconstructing the by-laws governing the conduct of this association. Happily, the constitution was fixed last year. Doubtless most of you have given the matter some thought and gained much information, as opportunities have been presented you for so doing in your own nursing JOURNAL.

"You will recall the eloquent appeal made in our last annual meeting for the continuance of high standards in the Associated Alumnae, also the fact that the appeal was appreciated and sanctioned by the assembly.

"Your committee will place in your hands for your approval or otherwise the by-laws as reconstructed by them. The question of eligibility for membership is the one of paramount importance. It would be our pleasure to provide for the membership of all organizations working for the uplifting of the profession, but in this great care and discrimination must be exercised lest we present the spectacle of descending to a lower plane instead of encouraging our co-workers to rise to ours. Experience has taught us that we gain much by insisting upon the inauguration and maintenance of high standards. The curriculum of more than one school has been improved and extended to meet the requirements for membership in the Associated Alumnae. Our organizers foresaw the wisdom and necessity of such a course when they conceived the plans for the construction of this great body.

"It is not ours in this day to organize, but it is our great duty to preserve the well-trying and useful methods and, if possible, improve them. It is our duty to develop all our resources and assist others to know and develop theirs. If they can best do it by membership in the national body, it should be our esteemed privilege to extend to them our aid, not by the lowering of all barriers, but by showing them how the barriers may be surmounted.

"You will have presented to you the work of another committee—namely, that on 'periodicals.' An analysis of the work of this committee in the remote past is unnecessary—you see it in the valuable organ, the ownership of which it may be your pleasure as an association to acquire. The possibility of this action has been before you

during at least one whole year, therefore it is expected that you come here qualified to act your part according to the wishes of the local body you represent.

"The struggles of that committee in its early days would be interesting to you if recounted, the fearlessness of the spirit of enterprise would entertain you if described, but it might not materially aid you in your present duty, which is to consider the committee's report and the ways and means for the Associated Alumnae to obtain the financial ownership of *THE AMERICAN JOURNAL OF NURSING*. Doubtless you have solved the question of our present form of incorporation permitting such ownership and are convinced of the legality of such procedure.

"Most of the work, as you see it mapped out for us, affects us either as a body or as individuals; in it all we have made very little provision as an association for any means of aiding in the promotion of the general welfare.

"For years we have as a nation been comparatively tranquil; we have been agitated by no mighty revolutions. Other continents have had their thrones shaken, while the foundations of our national power remain firm. We trust it may be ever thus; we hope that the light of peace may be ever upon us; that the products of our toil may be abundant; that dread epidemics may not stalk abroad slaying our beloved first born; that flood and fire may not sweep over our land to lay it waste and spoil the form of its fair face.

"May it never be ours to meet war or famine, pestilence or fire, flood or drought; but, should any of these grave disasters attend upon us, shall we be found unprepared? We shall never as a nation be *wholly* unprepared. Our national resources and our loyal love of country preclude such a possibility, but sufferers there will always be, disasters will occur even in isolated places; war will threaten and necessity may demand that we withhold not ourselves from it.

"How then can this great body of serving-women best serve its country and its country's people when put to such straits? Individuals among us have always been found who would respond to the needs of our fellows—may their number increase and likewise their strength! But the charge has been made, and with some show of justice, that as a body of professional women we respond slowly—we are commercial, we receive more willingly than we give. Indeed, one famous for his good deeds in that profession whose handmaidens we delight to be, as well as for his faith in the work of the nurse, has said that until we eradicate this failing we can lay small claim to the assumption that ours is really a profession. However disputed that point may be, it still remains true that we often miss our opportunities for identification

with the world's great philanthropies. Is it not time that we should, and may we not here decide to, reverse our methods, and place ourselves on record as being organized for response to any call that may come to us to aid humanity in any needed way?

"We have in this country an organization known as the National Red Cross Society, with whose name at least we are familiar, but whose plans for work we do not always comprehend. Our idea would be to ally ourselves with this national body for practical purposes.

"Unhappily, the Red Cross Society is not at present able to do much work,—it being in a process of reconstruction,—but it will eventually be as effective as any society of its kind in any other nation in the world.

"So strong was the conviction that nurses should be awake to their opportunities and responsibilities in this direction that an informal committee visited in Washington, last winter, members of the Red Cross Association in high official position and placed the matter before them. The suggestions of the committee were welcome, and it was advised to make preparations for the work, with the promise that an opportunity would be given the nurses for rendering their service whenever the demand for such service should arise, and with the further promise that if there were then no Red Cross Society with which they could be allied there would be some organization equally effective.

"This concession was made because of the very evident fact that neither distinction nor position, neither money nor any other emolument, was sought, but simply an opportunity for work in the most practical and effectual manner. Therefore the appeal is made to you to consider the advisability of getting into form for such work. It is made to you because you are the rank and file of the nursing profession in this country, and without you nothing can be done, upon you must the dependence for service be placed.

"Let us be personally indifferent whether this new work be inaugurated under the auspices of the Associated Alumnae, or the American Federation of Nurses, or some other nursing body: thus shall we prove the sincerity of our request for *only an opportunity to serve*. 'Let our conceptions be enlarged to the circle of our duties and opportunities.'

"Then shall we fulfil one of the avowed purposes of our being.

"It is indeed a pleasing reflection that for the consideration of these vital questions we are fortunate enough to meet in this grand old city of 'Brotherly Love,' with its history as the centre of wise deliberations in the past. We gather courage and inspiration from the contemplation of what our fathers here accomplished, and we would

show forth our gratitude to the friends who made it possible for us here to assemble and who have to-day offered us kindly greeting and hospitality.

"May we reward them by pursuing diligently the great objects we have before us, that they may be able to say in the future, *here* were inaugurated schemes for the betterment of humanity and the uplifting of an honorable profession."

PRESIDENT.—We will ask Miss Whitaker to give us the report of the Committee on Arrangements.

Miss Whitaker reported as follows:

"The Board of Trustees of the Drexel Institute, through the courtesy of its president, Dr. James MacAllister, having kindly granted the auditorium, lecture-room, and other facilities for the use of the association. The library, museum, and picture-gallery will be open after each session to the delegates. Dr. MacAllister regrets very much that owing to ill-health, he is not able to be at the opening of the convention, and asks me to say that 'you are all most cordially welcomed to Drexel Institute, and we shall endeavor to do everything in our power to make your meeting here as pleasant as possible.' Three committee rooms are given for the use of the association and the auditorium for a cloak-room.

"Cordial invitations have been extended to the members of the Nurses' Associated Alumnae to visit the following hospitals—University, Blockley, Presbyterian, Episcopal, Jefferson, Methodist, Hahnemann, Jewish, Germantown, Medico-Chirurgical, German, Polyclinic, St. Joseph's, Woman's.

"This afternoon from four to six o'clock a 'tea' will be given to the members by the Alumnae Association of the Polyclinic Hospital, 1616 Lombard Street, in their Nurses' Home. South Seventeenth Street cars are the nearest.

"Pennsylvania Hospital, Eighth and Spruce Streets, founded in 1761, possesses many interesting features, and you are all cordially invited to visit it between the hours of three and five P.M. to-day. This evening a reception will be given by the Germantown Hospital managers (through the thoughtfulness of the superintendent of the hospital, Mrs. Maud Vaughan) at the Manheim Cricket Club, five-minute walk from Queen Lane Station, Germantown. All graduate nurses are cordially invited to be present. Special train will leave Broad Street Station on Pennsylvania Railroad at seven thirty-seven this evening. Please meet there promptly at seven-twenty P.M. A badge of white ribbon must be worn to get through the gate to the train.

"A luncheon will be served to the members daily for thirty-five cents in the students' dining-room just across the street. This is through the courtesy of Miss Spring, director of the Domestic Science Department of the Drexel Institute.

"To-morrow, Friday, from nine-thirty to ten A.M. an organ recital will be given in the auditorium by Mr. James M. Dickinson, the organist of Drexel Institute. Four P.M. a visit to Girard College. Heartly invitations from the Board of City Trusts have been given by the president, General Louis Wagner. White badges must also be worn to gain admission. Battalion drill has been postponed until four-thirty P.M. for our accommodation. Eight P.M., a dinner by the graduate nurses of Philadelphia to the officers, delegates, and charter members will be given at The Roosevelt, 2027 Chestnut Street. Visiting nurses can secure dinner cards by notifying any member of the Committee on Arrangements not later than Friday at ten A.M.

"Saturday, four P.M., trolley ride for officers, charter members, and delegates through Philadelphia and Fairmount Park out to the Episcopal Hospital, where a supper will be given them by the managers of the hospital. All members attending sessions are invited to the supper and can go out to the hospital on the cars.

"An invitation has just been received for the members to visit Woman's Hospital, North College Avenue, where tea will be served every afternoon during convention.



"Anyone wishing to visit points of interest in the city or suburbs can get directions or secure the services of a guide by speaking to any one of the ushers.

"M. MARGARET WHITTAKER,  
"Chairman Committee on Arrangements."

PRESIDENT.—I want to urge upon the delegates the necessity of prompt attendance upon these meetings. We have much to do and shall have very little spare time. Therefore the session will open promptly at ten o'clock; if you do not wish to disturb the progress of it, be in your seats before that time. You are now adjourned to meet at ten o'clock to-morrow morning in this hall.

*Second day, Friday, May 13, 1904—Morning.*

The house was called to order at ten o'clock, president in the chair.

PRESIDENT.—As this is the beginning of our business session, we will open our proceedings with the roll-call.

The secretary called the roll, one hundred and seven delegates with one hundred and seventeen votes (five proxy votes) responding.

PRESIDENT.—We will listen to the secretary's report.

SECRETARY.—Madam President, as a report, I would call the attention of the delegates to the minutes of the sixth annual convention, which they have in printed form, and proceed with the report of the proceedings of the Executive Committee for the year 1903-1904.

"MADAM PRESIDENT AND DELEGATES: The Executive Committee in presenting its report last year prefaced it by reminding the members of the Associated Alumnae that the period had been, of necessity, one of planning and shaping preparatory for the work to be taken up in the future, when the by-laws should be definitely settled upon. This year, as last, the committee has been able to do only such routine business as presented itself for immediate solution.

"The preliminary meeting of the year 1903-1904 was held in Hotel Brunswick, Boston, on Saturday, June 13; there were present at this meeting Miss Riddle, who had succeeded herself as president; Miss Rudden, first vice-president; Mrs. Hutchinson, second vice-president; Miss Healy, treasurer, and Miss Thornton, secretary.

"At this meeting the Alumnae Associations of the following hospitals were considered and promoted to full membership: House of Mercy, of Pittsfield, Mass.; the Old Dominion, of Richmond, Va., and the Salem, of Salem, Mass. The business of the convention was wound up and the work for the new year outlined.

"Miss Lucy Walker had been elected chairman of the Committee on Arrangements, and it was decided to ask her to place on her committee representatives from as many different hospitals in Philadelphia as possible. Miss Milne was appointed on Printing Committee.

"The second meeting was held at 120 East Thirty-first Street, New York City, on February 4. There were present at this meeting Miss Riddle, Miss Rudden, Miss Healy, and Miss Thornton.

"The applications of the Newton Hospital, membership forty; the Wilkes-Barre, membership forty-two; the Western Pennsylvania, membership thirty-five, and the Jewish, membership twenty-six, were considered and they were found eligible for full membership.

"The applications of the Freedman's, the Union Protestant Infirmary, and the Reading were not fully understood by the committee, and the secretary was instructed to place the papers on file pending correspondence.

"It was voted to have the Census Committee take up work, and Miss Ross was appointed to take it in hand.

"The secretary of the association was appointed a delegate to the International Congress of Women to be held in Berlin in June, 1904.

"Miss Walker's letter stating that she was unable to act on the Committee on Arrangements for the Seventh Annual Convention was read with regret and Miss Whitaker was appointed to the position.



"It was decided that the papers for the convention should be upon State registration and organization and upon central directories, these to be arranged in sections, and that a chairman be appointed to conduct the discussion upon each section.

"Miss Sara A. Bowen, of the Boston City Hospital Alumnae, was appointed to have charge of the section on State work.

"Mrs. Annie Hutchinson, the second vice-president, took charge of the Central Directory Section, to be presided over by Miss Helen Kelly, of the Illinois Training School.

"The third Executive Committee meeting was held on February 23, 1904, at 120 East Thirty-first Street, in New York City. At this meeting there were present Miss Riddle, Miss Rudden, Miss Healy, and Miss Thornton. The date of the convention was definitely placed, Thursday, Friday, and Saturday, May 12, 13, and 14, 1904.

"The applications of the Freedman's, membership forty-five; the Union Protestant Infirmary, membership twenty-three, and the Reading Alumnae, membership thirty, were again taken up with the additional information received, and they were admitted to full membership.

"A letter was read from Miss Ross declining the chairmanship of the Census Committee and resigning from the Committee upon Central Directories.

"Miss A. J. Greenlee was appointed on the Census Committee; the chairmanship of the Central Directory Committee was not filled. In the interim there have been admitted to full membership the Williamsport, Pa., membership forty-three; the Maryland Homoeopathic, membership twenty-five; the Homoeopathic of Pittsburg, membership eighty-six, and the Baltimore City, membership eighteen, action thereon being ratified at the meeting held at the Drexel Institute on May 13, 1904. Miss Riddle, Miss Rudden, Miss Healy, and Miss Thornton present.

"The alumnae of the New England Hospital, the St. Luke's of New Bedford, and the St. Luke's of South Bethlehem were promoted to full membership.

"The committee has under consideration the other three alumnae having an associate membership, making a total of eighty societies and a membership of several thousand.

"The committee has on file applications from the Philadelphia, the Lebanon of New York, the Dr. Joseph Price of Philadelphia, the St. Joseph's of Philadelphia, and the Mary Thompson of Chicago.

"The Executive Committee is in receipt of a letter from Mrs. Robb declining to have her name appear as honorary president of the association. "It feels in duty bound to respect her wishes in the matter, but in doing so is sure that it voices the sentiments of the association that though it be not allowed to have Mrs. Robb's name continued on its record as the honorary president, it will be a pleasure to always remember her as its most honorable first president, and feel at liberty to consult her upon matters pertaining to the welfare of the association.

"The committee is in receipt of a letter from Miss Deak donating to the Associated Alumnae one share of JOURNAL stock, thus assuring the association one vote as a stockholder in that corporation.

"The committee would also call the attention of the membership to the necessity for action as a body upon the matter referred to in the president's address—that of alliance with the National Red Cross or with some other philanthropic body purposing to carry on the same line of work.

"The committee would recommend that the associations sending more than one delegate each year would endeavor to return at least one former delegate, thus insuring more familiarity with matters brought up for discussion and of necessity more intelligent action than would be possible with all new delegates.

"Respectfully submitted,

"THE EXECUTIVE COMMITTEE,

"MARY E. THORNTON, Secretary."

On motion of Mrs. Wilcox, seconded by Miss Rhodes, the report of the secretary was accepted.

PRESIDENT.—The report of the treasurer will now be read.

Miss Healy, the treasurer, reported as follows:

TAMAR E. HEALY, treasurer, in account with the Nurses' Associated Alumnae of the United States,  
June 1, 1903, to May 12, 1904.

## RECEIPTS.

Balance on hand June 1, 1903.....	\$469 65	\$273 76
Annual dues for 1903.....	105 00	
Initiation fees.....	12 90	
Sale of Fifth Annual Reports.....	136 85	
Sale of International Congress Reports....	84 90	
Sale of Sixth Annual Reports.....	839 30	
Interest on bank account to date.....	2 92	

## DISBURSEMENTS.

Printing of International Congress Reports.....	\$23 82	\$395 09
Printing programmes, ballots, and application blanks.....	10 00	
Badges for delegates.....	45 00	
Rent of hall, three days.....	28 00	
Expenses of president attending Executive Committee meetings and on alumnae business to Washington.....	33 72	
Expenses of first vice-president attending Sixth Annual Convention and Executive Committee meetings.....	19 50	
Expenses of secretary attending Sixth Annual Convention.....	16 67	
Expenses of treasurer attending Sixth Annual Convention.....	50 00	
Typewriting and reporting proceedings of Sixth Annual Convention.....	16 67	
One thousand reprints of Sixth Annual Report.....	30 14	
Annual dues to National Council of Women	50 00	
Secretary, stamp, postal card, and current expenses.....	22 24	
Treasurer, stationery, stamp, and exchange on cheques.....	11 09	
Stamped stationery.....	9 57	
Typewriting notices, etc.....	2 84	
Auditing books.....	4 00	
Freight on reports.....	81	
Balance in Bank May 12 .....	\$345 57	
	373 71	
	<u>\$1095 08</u>	

Examined and found correct.  
Byron Horton, Auditor.  
May 17, 1904.

\$1095 08

Funds in bank for purchase of JOURNAL, \$12.00

The secretary read the various communications received, as follows:

*"To the Secretary of the Nurses' Associated Alumnae of the United States.*

"DEAR MADAM: May I ask you to convey to the Executive Committee of the Associated Alumnae one share of JOURNAL stock, which will be handed you by the secretary of the company?

"Very truly yours,  
"L. L. DOCK."

*"To the Secretary of the Nurses' Associated Alumnae of the United States.*

"DEAR MADAM: At the meeting of the Associated Alumnae, held in Chicago in 1902, I had the honor to be appointed honorary president of the association.

"As I was not present at that meeting, my acceptance of the courtesy could not be read until a year after at the Boston meeting. I have therefore had the privilege of serving as honorary president for two years. Now I beg that you place my resignation of the office before your Executive Committee. While I deeply appreciate the feeling that prompted my appointment, my personal idea is that no honorary position should be held by any active member of the association, as it is understood that each individual member shall do whatsoever work she can to further the interests of the association, and that this opportunity is equally great to the individual member and the official, and therefore appointment to office should only be for active work.

"With renewed expressions of appreciation of the honor done me, believe me, as ever,

"Yours faithfully,  
"ISABEL HAMPTON ROBB."

*"To the Secretary of the Nurses' Associated Alumnae of the United States.*

"DEAR MADAM: At the meeting of the New York County Nurses' Association, held on Tuesday, May 3, 1904, it was moved and carried that a most cordial invitation be extended the National Association to hold the convention of 1905 in New York City.

"Very truly yours,  
"J. AMANDA SILVER, President,  
"ELIZABETH BURNS, Corresponding Secretary."

"MY DEAR MADAM SECRETARY: Will you convey our best wishes for a splendid session to the Associated Alumnae? We hope that the nurses present will not miss this opportunity to do something for the profession, and will render themselves immortal by taking over the responsibility of the JOURNAL. We are so sorry not to be with you all.

"Yours sincerely,  
"ANNIE F. HUTCHINSON."

PRESIDENT.—We will call next for the report of the Committee on "The Course of Study and the Condensing of such Course," by Miss Greenlees.

Miss Greenlees reported as follows:

"MADAM PRESIDENT AND FELLOW-NURSES: Your Committee on Condensing the Alumnae Reports sent out fifty-six question blanks, and fifty-four were answered promptly. Two have not replied.

"Out of the forty-five States in the United States twenty-one report alumnae associations, and in all but four of these State organizations have been formed for the purpose of State registration, the uplifting of the profession in general, and raising the standard of nursing education.

"Following close on the registration movement, spoken of and indorsed by a few of the more progressive alumnae associations, comes the preliminary preparation of the nurse before entering the hospital wards.

"Two schools report public demonstrations given by the senior nurses of their hospital. The alumnae that can take advantage of these are to be congratulated, for it is a most excellent way for the earlier graduates to keep in touch with new methods and appliances.

"Mt. Sinai reports spending the time of one meeting on one of the questions sent out by the committee—viz., 'What has been done in a social, educational,

or charitable way? These questions are intended to be brought up for discussion in the various associations, and, if it has been generally done, the committee is encouraged.

"Several alumnae, instead of sending suggestions for work for the coming year, ask for them. They are given as received for their benefit as follows:

"To have courses of study relative to questions touching private duty and district work;

"To have social and charitable organizations which would be closely allied to district nursing;

"To have doctors address such meetings and have them monthly;

"To have associations interest themselves in educational work other than nursing;

"To have courses of general lectures, including physical culture, bacteriology, sanitary inspection, and parliamentary law.

"One sends this problem: 'How to establish an annuity fund or home for those too old to work.'

"Two, of which the following is one, are making it a point of alumnae work to encourage, support, and work for the ownership of THE AMERICAN JOURNAL OF NURSING. One school is now raising funds for the purchase of stock in the JOURNAL Company. It is to be regretted this is not the general rule. There should be a committee in each association for the advancement of the interests of the JOURNAL, including active work to increase the subscription list."

"From St. Luke's, Chicago, comes this:

"We suggest a broader interest in the nursing world outside of one's individual alumnae. Also more active encouragement in the welfare and support of THE AMERICAN JOURNAL OF NURSING, by subscription or otherwise. The fact that the effort of the JOURNAL has been particularly in the interests of the nurses of these United States has not been encouragingly recognized by those nurses."

"Respectfully submitted,

"ANNA J. GREENLEES,

"Chairman of Committee."

\*And to keep the JOURNAL informed of all new nursing work and progress not only in the individual associations, but in the community.

Alumni Associations.	Membership.	New members.	Resignations.	Deaths.	Discontinued.	Meetings.	Work accomplished.
University of Michigan, Ann Arbor.	45	9	.....	.....	.....	Eight business, educational, and social.	Lectures have been given on the Consumers' League and parliamentary law. The alumni was entertained by the ladies of the faculty of the university several times during the year. A reception was given to the graduating class. Money is given each year to the hospital circle of King's Daughters and the Fruit and Flower Mission. Working for registration.
Old Dominion Hospital, Richmond, Va.	33	6	.....	.....	.....	Meetings held quarterly.	Two lectures were given and one social meeting was held.
Illinois Training-School, Chicago, Ill.	273	16	.....	136	.....	Monthly meetings, business, educational, and social.	Papers were read at the meetings on Wisconsin, Indiana, and Illinois, also on foreign travel. Several meetings were social, one being an evening musical. The following subjects are to be taken up the coming year: "Central School," "Central Directory," and a "Chicago Nurses' Club."
Massachusetts General, Boston, Mass.	210	24	4	2	25	One educational, seven social.	Improvement in good-fellowship. Work for preparatory course for nurses.
Gardner Memorial Hospital, Washington, D. C.	56	4	.....	.....	.....	Seven business, two educational, one social.	United with other alumni associations and graduate nurses in the District of Columbia to form the Graduate Nurses' Association of the District of Columbia, the principal object of which is State registration.
Children's Hospital, San Francisco, Cal.	98	19	.....	.....	.....	Eight meetings, combining business, educational, and social.	California State Nurses' Association formed, also a nurses' directory. Entertained the delegates to the national meeting of the Spanish-American War Nurses. Endeavoring to endow room for sick nurses, also to forward the education and equipment for the Pacific Coast Nurses.
Virginia Hospital, Richmond, Va.	30	8	.....	.....	.....	Six business and social.	An alumni room has been established at the hospital. Efforts made towards raising sick fund.
Allegheny Hospital, Allegheny, Pa.	100	17	.....	219	.....	One social, six business.	Are working to endow a bed, necessary amount, five thousand dollars. By different entertainments two thousand dollars has been raised.
St. Joseph's, Paterson, N. J.	11	.....	4	1	.....	Three business.	.....
Presbyterian Hospital, New York City.	133	19	1	2	.....	Monthly business meetings.	One nurse kept at Nurses' Settlement. Demonstrations given by senior nurses to keep alumni in touch with new methods.
Presbyterian Hospital, Philadelphia, Pa.	168	10	2	.....	.....	Seven business and social.	Four orphans in India are being educated.
Pennsylvania Hospital, Philadelphia, Pa.	11	21	.....	5	.....	Seven business, social, and charitable meetings.	The work of sending a box to the sick poor of the city is to be continued.
Paterson General, N. J.	58	6	.....	.....	.....	Six business and social meetings.	Attention was given to sick nurses.
Orange Memorial, N. J.	100	13	.....	3	.....	Four business and social and two lectures.	A tea was given to the graduating class.
Kings County Hospital, Brooklyn, N. Y.	43	2	.....	.....	.....	Four business.	Two social meetings.
Hospital of the Good Shepherd, Syracuse, N. Y.	82	8	.....	.....	.....	Monthly business, educational, and social.	Medical lectures were given. A reception to the superintendent and his ten. The sick nurses were cared for. An alumni room in the hospital was furnished.
Bellevue Hospital, New York.	304	19	1	.....	.....	Eight business and social.	One share stock taken in THE AMERICAN JOURNAL OF NURSING. A fund raised for the care of sick nurses.
Mt. Sinai Hospital, N. Y.	90	13	2	.....	8	Eight general meetings, and five directors' meetings. Business and social.	Through the efforts of the alumni ten thousand dollars has been presented for endowment purposes.



Alumnae Associations.	Membership.	New members.	Resignations.	Deaths.	Dismissed.	Meetings.	Work accomplished.
Hahnemann Hospital, Philadelphia, Pa.	80	7	1	1	8	Monthly business, educational, and social.	A Current Event Club formed. Annual reception to graduating class. A musical was given. Members aided through the sick fund.
New York City Hospital, N. Y.	228	16	2	34		Ten business and social.	Lectures were given on general subjects. Reception to graduating class. Needy members were helped.
New Haven Hospital, Conn.	82	11	2	1	11	Ten business and social.	A State association has been formed. Working for registration.
New York Hospital, N. Y.	202	18	7	2	7	Annual meeting, seven regular, two special.	Enlarged quarters were provided for club nurses.
Massachusetts Homoeopathic Hospital, Boston, Mass.	102	16	1	1	2	Monthly business, educational, and social meetings. Annual dinner.	Monthly lectures on subjects pertaining to work. Papers by members on their travels. Working for State registration and how to care for sick members.
Maine General Hospital, Portland, Me.	40	15	...	...	1	Twelve meetings, two social.	Two lectures by physicians. Papers at each meeting by members.
Long Island College Hospital, Brooklyn, N. Y.	108	24	2	1	...	Nine business, educational, and social.	Lecture course. Association incorporated. Registry established at Nurses' Club. The services of nurses given in a number of cases to charity.
Hahnemann Hospital, Chicago, Ill.	44	8	...	...	4	Monthly meetings, two social.	Sick benefits given to members amounting to two hundred dollars.
Germantown Hospital, Philadelphia, Pa.	26	5	...	...	2	Eight business.	Much more cordial relations have been established between old and recent graduates.
German, New York City, N. Y.	86	9	3	...	...	Nine meetings.	Have studied parliamentary law.
Columbia and Children's, Washington, D.C.	60	8	1	...	...	Six business and educational.	Course taken in parliamentary law. Social meetings held.
Brooklyn Homoeopathic Hospital, N. Y.	64	3	1	1	...	One social, five business.	.....
Boston City Hospital, Boston, Mass.	300	64	...	1	...	One business and social, one social, four executive.	Sick members visited. Working for State registration.
Augustana Hospital, Chicago, Ill.	60	14	1	...	...	Eight business and educational, one social.	There has been a course of lectures. Alumnae papers. Sick benefit fund established and flowers sent to sick members.
Rochester Homoeopathic Hospital, N. Y.	65	18	...	1	...	Four business and social, two social.	The association is expecting to take up current events and travel.
Rochester City Hospital, Rochester, N. Y.	88	5	1	...	1	Four business and one social.	Alumnae more interested in the work of the association.
Protestant Episcopal, Philadelphia, Pa.	128	17	4	...	...	Monthly, combining business, educational, and social.	Social life improved.
Provident Hospital, Chicago, Ill.	48	6	...	...	...	Twelve business and social.	A course of lectures given on nursing subjects. They have visited and taken care of sick nurses.
Hartford Hospital, Hartford, Conn.	60	12	2	...	...	Business meetings.	.....
Hope Hospital, Fort Wayne, Ind.	20	8	2	...	1	Twelve business and educational.	Furnished room in new wing of hospital. Original papers by nurses read at meetings.
Forward Training School, Detroit, Mich.	108	12	...	...	...	Seven business and educational, one special.	Lectures have been given by physicians. Social meetings and literary entertainments held. Donations of money and services to the Visiting Nurses' Association.
St. Mary's Hospital, Brooklyn, N. Y.	38	10	2	...	...	Four business and social.	Maintain room for sick nurses.
St. Barnabas Hospital, Mass.	50	3	4	...	2	Nine business and educational.	Have held classes in current events and parliamentary law. A branch of St. Barnabas Guild started.

Alumni Associations.	Membership.	New members.	Resignations.	Deaths.	Transfers.	Meetings.	Work accomplished.
Roosevelt Hospital, New York.	84	24	...	...	...	Eight business and two social.	Sick benefit fund started. Appropriations of money and services of nurses given to the Henry Wood Sanatorium for Tuberculous Women and Children.
University of Pennsylvania, Philadelphia, Pa.	126	17	1	1	1	Ten business and three social.	Issued call to initial meeting for forming the State Nurses' Association. Opened nurses' register in the hospital. Money, bedding, and clothing collected for settlement work.
University of Maryland, Baltimore, Md.	82	13	1	1	1	Four regular and one special.	Working for State registration. Alumni dues have been raised and sick benefit fund established.
Toledo Hospital Training School, Ohio.	84	5	1	1	1	Ten monthly business.	Working for State registration.
St. Luke's, New York.	114	20	1	1	1	Four regular and four special.	A nurses' registry established. Fair held. Endowed a private room for four months of the year in the hospital for graduates. Secured course in physical culture.
St. Luke's, Chicago, Ill.	135	14	9	1	13	Nine business, educational, and social, two special, five executive.	Eight lectures were given on general subjects. Ten informal teas. Reception to Miss Palmer. Two hundred and forty-seven dollars and fifty cents raised for the sick benefit fund. Five hundred dollars netted by doll's booth towards equipping new hospital for St. Luke's.
St. Joseph, Chicago, Ill.	70	10	6	...	...	Ten business and educational.	A benefit fund established and sick benefits paid.
Johns Hopkins, Baltimore, Md.	278	28	3	1	...	Six business, three educational and business, and one social.	Assistance by means of public meetings, and work on the Preliminary, Legislative, and Publication Committee, in procuring State registration. The Tuberculosis Exposition Exhibit of work of the Visiting Nurses' Association of Baltimore. Contributions to this exhibit from members in Washington, Philadelphia, Newark, and Minneapolis. Special exhibit of visiting nurse among tubercular patients. Maintenance of the successful alumni journal. Transferring of dividend on one share of stock to the treasury of the Associated Alumni for future use in the purchase of THE AMERICAN JOURNAL OF NURSING. Assistance volunteered to district nurses to aid in the emergency following the great fire. Financial aid to conference. Quarters supplied to the staff of district nurses during a contagious outbreak. Subscription to aid in building tuberculosis sanatorium. To further and encourage so far as able all educational work, such as the Teachers College course in Hospital Economics. Active work towards the ultimate ownership of THE AMERICAN JOURNAL OF NURSING, and incidentally increasing the subscription list. A vigorous campaign against such pernicious educational bait as correspondence schools for nursing.
Methodist Episcopal, Brooklyn, N. Y.	75	15	4	1	1	Ten business and social.	A reception to graduating class. Have started an endowment fund to be used for a room to be known as Alumni Associate room.
Brooklyn Hospital, Brooklyn, N. Y.	104	...	...	...	...	Business and social meetings.	An endowment fund is being raised, each nurse pledging herself to raise fifty dollars. More than one-third of the amount has been raised.
New York Post-Graduate Hospital, New York.	154	31	1	2	2	Six regular and one special meeting.	Establishment of official registry and a fund for sick nurses.
Rhode Island Hospital, R.I.	121	7	1	...	...	Monthly meetings, business and social.	.....
Worcester City Hospital, Worcester, Mass.	76	10	1	2	2	Social and business.	A reception was given to the graduates.

**PRESIDENT.**—You have an opportunity now to ask any question that may occur to you in reference to the course of study and the compiling of these reports. I am very sure that Miss Greenless will be pleased to answer any questions if you present them now.

**Miss FAYTON.**—I should like to know how, after arranging the course of study, you could compel the attendance of the alumnae membership?

**Miss GREENLESS.**—I think that anyone interested in a course of study would attend without being compelled.

On motion of Miss Davids, seconded by Mrs. Fleetwood, the report of the above committee was accepted.

**PRESIDENT.**—We will now call for the report of the Committee on "The Revision of the Constitution."

The report of the Committee on the Revision of the Constitution was read by the secretary, as follows:

"The work of the committee will be placed in your hands during these sessions.

"It was never possible to assemble the committee for work upon the constitution, consequently what you have is the result of correspondence.

"The constitution was decided upon last year, when proceedings were stayed at the eligibility clause. Your committee endeavored to provide for societies other than alumnae in a simple way which seemed also practical. It is practical because the provision is made in the by-laws and a change will not be difficult after a trial of a year or two.

"As our constitution and by-laws have been in a state of reconstruction for years, great difficulties have been found in the management of the affairs of the association. Especially has this been true when committees were new to the work.

"Therefore the committee would earnestly suggest that you decide upon some form of government for the association.

"Respectfully submitted.

"MARY M. RIDDLE.

"Chairman Committee on Revision of Constitution."

**PRESIDENT.**—This revision of the constitution will be placed in your hands for your action at the proper session. We have not put it in your hands to-day because we have but a limited number of copies and we were afraid we would not have them when they were required.

On motion of Mrs. Milne, seconded by Mrs. Higbee, the report of the Committee on the Revision of the Constitution was accepted.

**PRESIDENT.**—The next item in the order of business will be the report of the Committee on Periodicals.

Miss Davis, chairman of the Committee on Periodicals, read the report of that committee, as follows:

"**MADAM PRESIDENT AND LADIES:** At the last meeting of the Associated Alumnae it was voted to add to the number of the Periodical Committee two new members, not stockholders, to confer with the old members on the feasibility of the Associated Alumnae owning THE AMERICAN JOURNAL OF NURSING and to suggest ways and means to accomplish it.

"A meeting of your committee was called January 20, 1904, in New York, Mrs. Robb, Miss Nutting, and the chairman constituting the quorum.

"Mrs. Hutchinson, of Chicago, and Miss Frederick, of New York, were the new members elected in accordance with the vote.

"In view of the difficulty of obtaining a quorum when a committee is large and the members widely separated, it was agreed to carry on our deliberations by correspondence. Accordingly, your chairman wrote to each member of the committee asking for ideas and suggestions to formulate a circular to be sent to the affiliated alumnae associations and to the stockholders.

"A circular was sent to the above-mentioned parties asking the stockholders to name the exact amount for which they would be willing to surrender their holdings to the Associated Alumnae in case it found itself in a position to buy up the JOURNAL stock.

"Eighteen out of forty stockholders replied. Two expressed themselves as willing to sell at par plus a certain per cent., minus the dividend already received, one at par less ten per cent., and all the others at par.

"The affiliated alumnae were asked to give their opinion on the feasibility of the transfer of ownership and to suggest ways and means to enable the Associated Alumnae to raise the funds necessary for the purchase.

"Nine out of fifty-six responded. Six of the nine were against making any change.

"In making a digest of the ways and means suggested, your committee has the following to suggest:

"First, that the affiliated alumnae members be assessed so much per capita, the amount to be fixed by a committee appointed for the purpose.

"Second, that the affiliated alumnae purchase a share or shares and turn them over to the Associated Alumnae.

"Third, that the Associated Alumnae borrow the necessary amount to purchase the outstanding shares.

"Fourth, that the Associated Alumnae purchase the remaining unsold shares and, as it finds itself able, purchase from the present stockholders, as they may be found willing to dispose of them, a sufficient number of shares to obtain a controlling interest, thus practically becoming the owner.

"Respectfully submitted,

"M. E. P. DAVIS, Chairman."

PRESIDENT.—You have heard the report of this committee. Is there to be any discussion upon this report?

MISS PAXTON.—If the association would buy the outstanding shares, what would the association have to do with the management of the JOURNAL?

PRESIDENT.—I would say that the management would be theirs.

MISS DAMER.—I would say that we would have seventy-two votes out of one hundred.

(MISS McLAUGHLIN.—May I ask the value of the shares?

PRESIDENT.—The par value of each share is one hundred dollars.

On motion of Miss McInnes, seconded by Mrs. Fleetwood, the report of the Committee on Periodicals was accepted.

MISS DAMER.—I would like to ask if this closes the discussion on the subject of the JOURNAL.

PRESIDENT.—This closes the discussion upon the report only.

MISS NUTTINS.—I move that the president appoint a special committee of five to confer with the Board of Directors regarding the purchase of the JOURNAL, said committee to report to-morrow morning at the executive session.

Seconded by Miss Milne. Carried.

The president appointed the following as a special committee to confer with the Board of Directors regarding the purchase of THE AMERICAN JOURNAL OF NURSING, such committee to report at the executive session to-morrow (Saturday) morning: Miss Frederick, Mrs. Robb, Miss Damer, Miss Goodrich, and Miss Greenleaf.

MISS NUTTINS.—May I ask that a word be said to the delegates so that they will understand why the other members of the Periodical Committee could not go on the special committee of five?

PRESIDENT.—The Committee on Periodicals, which has been appointed to look into the advisability and ways and means of purchasing the JOURNAL, is partially composed of members who are also on the Board of Directors for

the JOURNAL. If they were appointed on this special committee they would simply be conferring with themselves.

#### EXECUTIVE SESSION.

**PRESIDENT.**—The principal business before the delegates at this session is the formation of the Nominating Committee, and it is all that there will be time for. Before you proceed to that I wish to make an announcement or two. In the first place, the Board of Directors for the magazine will meet the new committee of five appointed this morning upon this platform immediately following the close of this session.

As I said before, the business before this executive session is the formation of the Nominating Committee. As our new constitution and by-laws have not yet been ratified, we have to go by the old constitution which has served us for so many years. The method is this: The alumnae associations of one State assemble themselves together in a group in some corner and elect one member of the Nominating Committee. That group must consist of at least five alumnae associations. For instance, the alumnae associations of the State of Pennsylvania must assemble themselves together and elect one member of the Nominating Committee; the same must be done by the associations of any other State. If you belong to a State in which there is but one alumnae association, you must unite with the alumnae associations of some other State in your neighborhood until you have five alumnae associations represented and elect one member of the Nominating Committee.

Executive session adjourned.

*Second day, Friday, May 13, 1904—Afternoon.*

Meeting called to order by the president at two-thirty.

**PRESIDENT.**—As you heard from the secretary's report this morning, it was decided at one of the Executive Committee meetings during the year that the programme of papers for this convention be divided into sections and that each section be given in charge of some alumnae association. It was decided that the preparation of the programme of the section upon State registration should fall to Massachusetts; therefore the programme will be presented to you this afternoon by Miss Bowen, of the Boston City Hospital Alumnae. I take great pleasure in introducing Miss Bowen.

#### "STATE REGISTRATION"—MISS BOWEN.

"One of the most absorbing questions before the minds of the nursing body to-day is that of State registration. The mere question of our legal status is of momentous importance, but that is only a small part of the point at issue. This is the first time that nurses have risen up in a body—independently—and asserted their fitness for and their right to a professional recognition equal to that given the members of other professions.

"This movement is not a sudden thing. It is the natural culmination of a work that began fifty years ago when Florence Nightingale started with her band of women for the Crimea. Even her far-reaching insight could not foretell the magnitude of the change she was instituting, but her dauntless courage and her unfaltering belief in the



sacredness of her calling gave her the incentive for a work whose results have only begun to be manifest. That the nursing world at large should be interesting itself in the advancement and betterment of nursing standards, and that this body of women should be gathered here to-day to promote the cause of State registration, is a natural consequence of Miss Nightingale's pioneer work.

"Possibly it may be well to refresh our minds by a short résumé of the work already accomplished in State registration. The nurses of the United States are by no means the first to agitate this question. In 1891 South Africa passed a bill giving legal recognition to its nurses, carrying on its work by means of the State Medical Council, which includes physicians, dentists, pharmacists, and nurses. This method would not satisfy our spirit of independence, but when we consider that the bill was passed thirteen years ago, and has been in successful operation since then, we can only commend a measure so far in advance of its time. In Australia the work of legal registration is being agitated, and in New Zealand a very comprehensive bill was passed in 1901. England is alive to the question, and the nurses there, after much controversy, have a bill ready to present to Parliament. In Canada the Province of Ontario has formed a State society, and in Ireland and Germany the work is also beginning with vigor and enthusiasm.

"Of the progress of State registration in our own country we have just cause to be proud. Not, perhaps, on account of the number of States which have carried the matter through to successful issue, but because in the main the nurses have stood firmly for the vital points at issue and have been willing to work and wait until they could obtain them. At the time of our convention last year four States—namely, North Carolina, New Jersey, Virginia, and New York—had secured the passage of their respective bills. Besides these, Michigan, Illinois, Minnesota, Massachusetts, Pennsylvania, Ohio, Maryland, Connecticut, Louisiana, Iowa, District of Columbia, California, and Indiana have now taken steps to secure legal registration for the nurses within their borders. Of these, Maryland has secured the passage of its bill, while the others are still working towards that end.

"The pioneers in any movement are the ones who have to surmount the most formidable and perplexing difficulties. They break the path, and those who come after may walk in their footsteps, avoid their pitfalls, and sometimes broaden and emphasize the way. The nurses who were the pioneers in the work of registration have done a great work for those who come after them. From their experience many fundamental points may be deduced which are vital for the well-being and permanence of our professional organization. Let each new State in the

framing of its bill study well the bills of other States, improving where they may have failed, always aiming to carry forward the banner they have raised.

"One of the greatest dangers we encounter in our work for registration is the danger of haste. It has been plainly demonstrated that it is better for a State organization to wait five years for the passage of its bill than to be successful with one which in its passage has become so mutilated that it has been deprived of its most essential points. Let not the nurses of any State be ambitious to be the next to pass a bill, (but let them direct their ambition towards the stipulations of the bill—what its restrictions and standards are, and whether it will place the nurses in that State upon the highest plane which they can possibly command.)

"Most nurses who have had experience with registration know that tactful, clear-headed, business-like dealing with legislative bodies has much to do with the passage of a bill. Such fundamental principles as the right of the nursing body to set its own educational and ethical standards and its demand for self-government must be insisted upon. If, in order to gain these important points, we are obliged to concede to the demands of the public others of lesser import, we are still maintaining our standards and gaining the points for which we are striving. When a State organization has decided what its basal principles are, let it insist upon them, no matter what the opposition may be. It is far better to have no bill at all than to have one which deprives the nurse of her right of self-protection and self-government.

"State registration is still in its infancy, and for that reason we are able as yet to show but little in the way of results, even in the States where the bills have already become incorporated into the laws of the Commonwealth. We shall hope, however, from the papers presented this afternoon, to gain much encouragement and inspiration, as well as practical help, in our further efforts towards State protection."

**"THE EFFECT OF REGISTRATION UPON THE EDUCATIONAL STANDARDS OF  
TRAINING-SCHOOLS AS SHOWN BY RESULTS IN NEW YORK  
STATE"—MISS SOPHIA F. PALMER.**

"I made a very rash promise a few weeks ago, and find that I come before you with empty hands, but I think perhaps I can tell you in a few words the effect of registration upon the New York schools, and I shall not be obliged to spend very much time in doing that. Just as soon as the bill was framed in New York State we began to realize a sort of stir among the schools. (We inserted a clause in that bill which required that all nurses to be registered must be graduates of training-

schools approved by the Regents of the University as maintaining proper standards, and there, you see, is the power of the New York bill.) As I say, just as soon as that bill was published, before it was passed, before it had gone into the hands of the legislators, there began to be a sort of stir. Those of us who were the promoters and the leaders of the movement began to have questions asked of us. What are you going to require of the schools, because we are reorganizing and would like to do it on proper lines? So far as I have had any experience personally since our standards were published,—as, of course, you are all familiar with the standards,—so far as I know personally, there has been no opposition from any of the New York schools—that is, the regular schools—to those standards.

"I wrote to the Regents' office a few days ago explaining that I was to come here to speak to this body of nurses on a certain subject, and asked what the attitude was on the part of the schools throughout the State and throughout the country in regard to our standards, and I received a most encouraging reply. In not one single instance had there been any unwillingness to conform to those standards or any antagonism or anything meant to be considered in any way as an objection to those standards.

"The training-schools connected with the insane hospitals are not equipped at the present time, many of them, to register their pupils, and we are having a little correspondence and a little controversy back and forth as to whether we will accept this hospital training or other substitution for hospital training, and so far we have not yielded in any point, and I do not think we will, but on general principles the schools that could not conform to our standards—which, of course, are very few—have immediately gone to work to make provisions that they may come up. One large hospital in New York that gave everything that we require but the care and nursing of sick children has in the short time since our standards were published, which is only two months, opened a large children's ward, so that the pupils of that school may be able to be registered and that they will have all of the experience that our standard calls for.

"It is too soon yet to know just what the result is going to be, but there is no question but just as soon as this matter of the legal status and the legal requirement is recognized that the schools will come into line with very little difficulty, and we are going to get from year to year a little better education, a little broader education, and a little more thorough education for the nurses throughout New York State. There are forty-four schools in New York that are not yet registered, but they undoubtedly will be, and most of them have made provisions either

by opening different departments or by affiliating with other hospitals to conform with the requirements which we have fixed, and at the end of two years the plan is to draw in the lines again, raise the standards, add to the curriculum, require more thorough instruction, and I believe that, step by step, if we can only be satisfied to go slowly enough, we shall gain in the end the thing that we have started out to obtain.

"I understand that although the bill of Illinois was vetoed, there is that same little, hustling movement going on out there—schools are reorganizing, adding to their curriculum; and I am told by Miss Cabaniss that the same thing is going on in Virginia, and there are other members of the association here who will speak for their different States.

— "The greatest difficulty that the examiners are having to contend with,—and I will just take one moment of your time to speak to you about it, although it is foreign to the subject in hand,—the greatest difficulty that we have to contend with is in finding out about the women who are applying for registration. They send us a paper, and the name of the applicant is strange to all the Board of Examiners; the name of the medical man is strange to the board, and it takes an immense amount of time for investigation and correspondence to find out who she is and whether she really is the person she represents herself to be, and that is the cause of the delay in a great many of the application papers. We have not as yet been able to get any knowledge of many women whose papers came in with the first lot, and they have to be put to one side because the Regents' office requires the Board of Examiners to sign a paper in which we say that So-and-so 'is personally known to us and to this board as being able to meet all the requirements of the law.' Now we do not sign our names to that paper unless some member of the board can find out something about the applicants, and if they are kept waiting ten years they will have to wait, (and that is the only way our law is ever going to amount to anything.) Political influence does not amount to anything; whether it is a Senator or the Governor who says, 'I want this person's certificate rushed right through,' that does not go. Just as soon as we can learn that she is the proper person she will have a certificate, but we have got to find that out first. If anyone now would like to ask me any questions about the New York conditions or the New York law I would be very glad to answer them."

**"THE JUSTICE OF AN EXAMINING BOARD COMPOSED OF NURSES"—**

**MISS S. H. CABANISS.**

"To raise a question as to the justice of the Examining Boards for nurses applying for State registration being composed of nurses seems quite like endeavoring to add more truth to an axiom by the addition of superlatives.

"Apparently, it has never occurred to the medical profession to place *dentists* and *lawyers* upon the Board of Medical Examiners, although patients sometimes require the *joint* services of all three professions. The selection of suitable nurses for military service, it has been quite generally conceded, is best left to the well-trained nurse of considerable experience rather than to a doctor, even though that doctor be a woman; and surely in no department of nursing is a more careful and rigid scrutiny of applicants essential than for the military nursing corps. A German, we readily admit, is the best judge of the *fluency* with which we may speak the Teutonic language, although some Frenchman may possess more than the ordinary colloquial knowledge of that same German tongue!

"The important and very close relationship between intelligent nursing and the practice of modern medicine and surgery is very generally recognized in this day of scientific development and progress. By none is this fact more readily admitted than by our leading physicians and surgeons.

"From no other source have we received greater encouragement and aid in our struggle for State registration than from the medical profession. But the question has already arisen, does not this interest sometimes prove of doubtful benefit to us? Not premeditated harm, but, like unwise counsel, it may occasion complications which are not to be advantageously adjusted without much effort and considerable expense of things material.

"There has been a decided tendency on the part of the law-makers and our attorneys to confound the State Board of Nurses' Examiners with the *Medical* State Boards—so vague and limited the knowledge of the public as to the education, professional scope, and obligations of nurses.) Some of the rather serious results of this confusion were experienced in the District of Columbia, where the Medical Board of Examiners desired to control the appointments, etc., of the Nurses' Board of Examiners. In Iowa the establishment of similar conditions was reported, but the nurses have been able to rectify the blunder or will do so at the next session of the General Assembly. North Carolina's State Board secretary reports 'that they have put doctors upon their board as a matter of choice, since certain subjects are always taught in the training-schools more satisfactorily by doctors. If this be true of the teaching, why not equally so in judging of fitness for the work? That the nursing is not an independent profession, and the more closely allied the two (medical and nursing) the better, as we are *co-workers* in the battle with disease.'

"It seems unnecessary, ill-advised, and distinctly a contradiction to place *doctors* upon a *nurses'* State Board of Examiners.



"Perhaps one can use no stronger argument in behalf of throwing the management of nursing affairs entirely upon members of that profession (particularly in regard to *State registration*) than to quote the opinion of the eminent pathologist of Baltimore, as expressed in his address at a meeting in that city which marked the organization of the Maryland State Association of Nurses: 'You have to consider exactly how to proceed to secure the State Examining Board. I noticed that in several of the States the law was almost imperilled by efforts to secure the presence of physicians upon these Examining Boards. Now I am quite sure that it is not the function of the physicians to examine nurses. The nurse should not go forth without having come under the guidance of the physician, but your profession is a skilled profession which requires special knowledge possessed by the *trained nurse* and *not* by the physician. Akin as the professions of medicine and nursing are, they are still *distinct* professions, and there is no necessity, in my opinion, and there are certain *disadvantages*, in the requirement that physicians should be members of the Nurses' Examining Board.'

"A member of the District of Columbia Association of Graduate Nurses at the Philadelphia convention of the Associated Alumnae explained to me that the JOURNAL and I had misunderstood the situation about an Examining Board in the District. The true state of the case is that the Nurses' Board must come under the Medical Supervisor of the District, as does the Medical Board—a condition very similar to the arrangement in New York, supervision of the Board of Regents."

**"THE NECESSITY FOR LOW STANDARDS IN THE BEGINNING"—PAPER OF  
MISS I. C. ROSE, READ BY MISS MOISAAC.**

"Without the least fear of arraying any opposing force against my statement—on the contrary, I voice the opinion of all who have been actively interested in the question of State registration when I say that the amount of good work that has already been accomplished is enormous. And if it were possible to have rehearsed to us the experience of each group of workers, we would be impressed with the fact that in every instance where the sought-for object was really attained it was reached through a gradual, slow growth, by carefully meeting each issue as it presented itself. All have met with disappointments, all have been brought face to face with the lamentable fact that there is so much that ought to be different from what it really is. But as no great and good thing comes simply for the asking, but requires a struggle to gain it, so in this undertaking it means close application to the underlying principles, repeated efforts if first ones fall short of the mark, and a determination born of an assurance that honest endeavor must, in the end,

win. And as we look about us we are not discouraged, but find an incentive to redoubled vigor, inasmuch as on every hand we see the effects of an impetus furnished by the agitation of State registration. Many hospitals and training-schools have wakened up to their shortcomings, and are making efforts to provide better conditions.

"This all takes time, and we must have patience, and not expect too much all at once. The tendency of our day is to hurry everything, and as a result we often rush headlong into matters that must be dealt with differently.

"Turning our attention to the various States, if we compare the results, what do we find? Who are the successful ones? Has it been those who considered haste the main factor in gaining the coveted object, consequently not giving the points at issue careful, thoughtful consideration before acting upon them; or has it been those who put time out of the question, preferring to 'make haste slowly,' doing nothing without most thorough deliberation? We are not at a loss for the answer. True, the work is all so new to us, along lines presenting phases entirely different from the usual training-school requirements, and therefore experimental in a way, and necessarily calling for calm, tactful, and matured counselling.

"If all training-schools were in a position to offer the same kind and amount of work, both theoretical and practical, one great difficulty would already be overcome. But, as we all know, there are many different standards, and to be just—neither too lenient nor too exacting—requires an unusual degree of judgment in order that such decision may be made as will draw the line just where it should come.

"And right here we must ask ourselves the question, which is the more advisable, to put our standard so high that only the smaller percentage of nurses can possibly meet the requirements, or at first shall we be content to have a more elastic standard? I think we will all agree that if we attempted the first for our plan of action, we would be compelled to accept defeat. For we would have arrayed against us naturally all who fell short of that standard. If, on the other hand, we measure from a lower notch in our scale, we at once enlist the coöperation of all within its scope. Of course, this is not to be carried to the point of sacrificing principle for the sake of gaining a thing which would profit us nothing by being gained in such a way. But we have more room for improvement when our standard is moderate, and for the same reason a greater number to be improved, than when it is so high that the rank and file cannot hope to reach it.

"Another viewpoint is that, given a little more chance, smaller and less completely equipped hospitals will feel the necessity for broader

work in order to compete with the more progressive ones, and indirectly the nurses reap the benefit.

"There is also a humane side to the question. At the present time there are many earning a livelihood and helping care for others than themselves who are not altogether to blame for not being first-class nurses, for the school in which they received their training did not give them the best. And every nurse cannot go to the best schools, as we well know. And, further, there has been no particular reason why prospective nurses should make careful inquiries about the various schools before deciding to which one she wished to make application.

"Should we not include those whose standards do not at present come up to the ideal requirements? and then gradually, as the schools are improved and brought up to a recognized standard, instead of, as at present, each one having its own, we can afford to insist upon a less lenient course.

"Another outcome of all this agitation will be the careful inquiry by young women wishing to take up this work as to the schools that will furnish them the best results, and schools that do not keep up in the march of progress will find that each year the material offering itself to them is less and less desirable. In a few years we will realize that the ranks contain a greater proportion of better-trained women, and the inferior schools will be crowded out of existence, or have been affiliated with large ones, and the standard be proportionately raised."

"STATE RECIPROCITY"—M. ADELAIDE NUTTING, JOHNS HOPKINS  
HOSPITAL ALUMNÆ.

"Our extreme youth in matters of organization and legislation makes us pause for a moment before the word *Reciprocity*, and wonder if we have yet reached a stage where we are ready to consider a question concerning which this much, at least, is clear at the outset, that though it is important, it is not immediately necessary for our progress in organization, and that it presents under the best conditions many great difficulties which must be met and overcome before it can be satisfactorily established. It is also clear that the conditions which the field of nursing organization presents for the present handling of this question are not only by no means the best, but that they would offer peculiar difficulties to any active effort in this direction.

"But though we are young in these matters, we still have made a beginning in the organization of State societies, we have secured in a few States such legislation as it is possible to obtain under existing conditions of education in nursing and of the corresponding state of public

opinion, and our youth should not prevent us from realizing that some features in relation to legislation which do not seem to be of special importance or value to us to-day may prove vitally necessary at a later day, and from exercising the wise foresight which recognizes and provides for future possibilities and future needs.

"While the forming of State societies, which must usually precede legislation (sometimes by a considerable period), has been accomplished so far in only eighteen States (?), and while actual laws have been secured, I believe, in but five, the question of reciprocity does not yet come home to us with any pressing force or reality; that it is pretty sure to do so later, however, seems clear if we are to draw any inferences from the efforts in this direction of some other professions, notably that of medicine, to which we stand in close relation. Just how far reciprocity has made its way into the various other professions I do not know, but I am told that the most eminent lawyer in the country could not leave his own State to conduct a case in some others, that a woman who can teach a school with conspicuous ability and success in one State cannot teach at all in some others, and that the restrictions of the law in this respect extend into occupations as well as professions, and are felt by many to be annoying or oppressive.

"Such conditions not being entirely compatible with the ideals of freedom which this country is believed to cherish, it is probable that efforts towards reciprocal relations in most of these matters have been made, and probable also that in some limited areas, where the standards of education and the laws are similar, some such relationships have been already established.

"We know that among members of the medical profession the matter has been the subject of more or less agitation for a good many years, and we also know that though it seems to be recognized by them as highly desirable, no practical steps towards complete reciprocity have been taken.

"From time to time committees from various bodies of medical men have been appointed to consider the subject. They have done so: have discussed, argued; disagreed, and finally concluded—their reports have been presented, and there the matter seems to have ended. No doubt progress is being slowly and steadily made, but the reports seem to show that the question is not a burning one; that, on the contrary, there is a considerable degree of apathy concerning it; that members are not in entire accord as to what they do want; that the formidable thing known as "*legislative obstacles*" stands in the way of obtaining such measures as have been agreed upon, and, finally, that reciprocity is still a long way ahead.

"These facts are dwelt upon to give emphasis to our statement that efforts on our part in this direction are not of immediate and urgent importance, and to encourage those of our members who are likely to be disappointed if something is not done about this matter on the spot.

"What is of importance to us is a general understanding of the matter, of its ultimate necessity, and of the means which should be employed to bring it about.

"To us there seems to be a reason for considering this matter with the utmost carefulness, quite apart from those generally considered in this connection; this is the widespread and universally recognized propensity of nurses to migrate. Nurses are the wandering spirits of the earth; their training teaches them to be ready to march, like a soldier, at a moment's notice; they seldom become deeply rooted in one place, seldom accumulate cumbersome belongings; they divest themselves of everything which may impede flight, and a change of residence becomes about as easy for them as for an Arab. Professional calls and needs carry them hither and yon from one quarter of the globe to the other for periods which may be brief, a few weeks, or may lengthen into years; they never know which. A nurse may in ten years actually live and carry on professional duties in half a dozen different States. With this in mind, it seems not unnatural to conclude that reciprocity may have even a deeper meaning for us, its establishment may be more essential to our general welfare than to that of those whose tendency it is to remain settled and known in one place. The ability to carry on our professional duties wherever we may be called or sent, without any embarrassments or delays, would seem to be rather imperatively necessary if we consider the matter from the stand-point of its benefit to ourselves only. But, just as we look with sharp scrutiny into the possibilities for useful citizenship offered by the strangers from other countries who present themselves at our shores, so may each State freely inquire whether its homes and institutions are likely to be benefited or endangered by the entrance therein of workers from other States. If its standards set up in certain directions for the welfare and protection of the community are met by disabilities, its right to say 'not allowed to land' is unquestioned.

"Reciprocity between States in nursing legislation is like commercial reciprocity between nations. Its distinctive idea is a sort of treaty by virtue of which certain advantages and privileges offered by one party are responded to by equal advantages and privileges from the other. This presupposes at once a certain equality of conditions, and conformity to definite and known standards, which make the value of the thing offered as great as the privilege granted.



"Towards reciprocity in nursing we take our first step when we ask for laws which shall establish standards of education for nurses, and require that those wishing to practise as professional nurses shall be proved to conform to those standards by a competent Examining Board. These laws are the very beginning of our efforts towards uniformity in nursing education, and they must also lie at the root of any attempt to establish reciprocity on a sound and permanent basis. It is difficult to legislate greatly ahead of existing conditions or of present public opinion, but the ultimate result of careful legislation upon educational systems must be marked. The schools of the future will find it absolutely necessary to their existence to conform to established standards, and Examining Boards will have much influence upon and control over nursing education. In those States where the standards are not high, nurses who are now trying to improve them by means of legislation may find the subject of future interstate reciprocity an excellent lever. It seems to me that neither educators nor legislators could resist the argument that a low standard would make it impossible for nurses graduating from schools in their States to obtain recognition or opportunities for practising elsewhere. If the requirements for registration in Kentucky, for instance, demand that a candidate shall be over twenty-one years of age, shall conform to definite standards of preliminary education, and that she shall have received two full years of training, practical and theoretical, in a general hospital in which medical, surgical, and obstetrical patients are treated, and instruction is given in anatomy, physiology, hygiene, and sanitation and dietetics, while the requirements for registration in Texas, for instance, are covered by simply two years of practical and theoretical training, with no further stipulation of any kind, there can be little use in talking of reciprocity until Texas has come up, unless we want to give a new meaning to the word and reduce it to an act of friendly courtesy. Those desiring opportunities of working in other States should be required to conform fully to the *rigidly* maintained standards of such States.

"It follows naturally, therefore, that uniformity of education in nursing should be achieved to some accepted degree before we can be ready to take up the question of reciprocity as a national matter.

"According to a statement in the editorial pages of a late number of *THE JOURNAL OF NURSING* it appears that recent investigations show 'an entire lack of uniformity of instruction both theoretical and practical in schools throughout the country.' I do not know that anything could be clearer, more positive, and more comprehensive than this statement. It is not limited nor qualified, and leaves us no room to wriggle out in any direction. Is it true? Statistics leave us little room for

doubt. If we take the qualifications for admission, we find that the age limit, while nominally from twenty-three to thirty-five years, in reality ranges from eighteen to forty years. I think I am safe in saying that the pupils who enter most of the smaller schools are nearer eighteen than twenty-three years of age. In the education of applicants the utmost liberality prevails—graduates of public schools, private schools, high schools, convents, and colleges enter side by side with an equal number who have graduated from no schools of any kind, some whose education is so meagre that they are taxed beyond their powers when required to write, spell, and punctuate properly an ordinary letter. Is there anything here upon which to graft a professional education?

"As to the period in training, it may be one year, two years, three, or even four years (witness a school in Massachusetts), or it may be ten weeks, according to a much advertised and surprisingly well-indorsed school in Philadelphia.

"It is but fair to say that three years seems likely to become the accepted uniform period of training, inasmuch as we find that out of five hundred so-called schools in America two hundred and thirty have adopted that term as a satisfactory period for the full course of study. Two of these schools with the three-years' course of study are attached to hospitals of ten beds each, and one enterprising institution finds itself in the happy position of being able with eight beds to furnish material and opportunities for a full three-years' course on the curious principle that the less one has to do, the longer time it takes to do it. The training-school may be established in connection with almost any building in which the sick are received and cared for, no matter what its size and purpose. Of more than seventy hospitals with schools attached the greater number have less than twenty-five beds, the larger number of these averaging from twelve to eighteen beds. Those hospitals supporting schools (sometimes to some extent supported by them) may be the useful general public hospital, the private sanitarium, or the hospital for the treatment of special diseases only. As for the subjects of practical teaching, they may be medical, surgical, gynecological, obstetrical, embracing also all contagious diseases and orthopedics, or they may be limited almost entirely to surgical work, perhaps chiefly gynecology, possibly in a hospital largely given over to the care of private patients. The training may be given in the hospital, or partly there and among private patients outside, or it may be picked up without careful supervision in the highways and byways of the city. There may be a monthly allowance of money paid to each pupil, and the sum may actually range from two dollars a month to fifteen dollars. The same sum may be paid each year of the three, or a different may be paid in two of the years

and not in the third one. Of a list of schools recently inspected we counted one hundred and twelve schools paying ten dollars a month to their pupils, and between seventy and eighty paying five dollars. There seemed to be no obvious reason for this wide variation; perhaps a glimpse into the treasury might have revealed it.

"In pleasing opposition to this method are a few schools which charge a tuition fee—and still further variety is found in the rapidly growing number of schools where the pupils neither pay nor are paid, and the work is conducted on what is called the non-payment system (about thirty of our representative schools have adopted this plan).

"The period of duty in the wards may be eight, nine, ten, or twelve hours. As for the methods of teaching, they exhibit a bewildering and fascinating variety. Take the fundamental subject of anatomy and physiology, for instance. It may vary from a course of six or eight lectures to one which occupies seven hours weekly for twelve weeks. It may also be omitted altogether from the course of instruction. The preparation of food for the sick and the study of food properties may be taught in a series of eight to ten lessons, each one hour long, or it may require four to six hours of practical instruction daily for two months. This brief summary of conditions which are known to exist shows plainly the diversity of methods and conditions. Surely, it may be possible by experiment, comparison, and test to settle upon some allotment of time for such subjects. Until we can further emerge from this chaotic and disorganized condition of nursing education, which permits every hospital or sanitarium in the country to establish and maintain a school for nurses in its own lines, until we have established and accepted some minimum standards upon which it is safe to work, we may continue to secure laws in certain States, but they will vary so greatly that the standards of one State will probably not prove acceptable to another. A comparison of such laws as have already been enacted shows this plainly, but it shows also that a liberal attitude in regard to reciprocity prevails. It is held by at least two out of the five States which have secured State registration, and we note the same spirit in the framing of another bill which has not yet passed. Reciprocal relations between two or three States whose standards of education and professional training are similar, and whose Examining Boards accept fully the standards of the others, might be established at an early date. The writer is of the opinion that it is possible to be too liberal and to fail to realize fully how carefully we should guard against the invasion of a lower standard from one State than that which has been set up by another.

"School announcements may mean one thing, their methods of work

quite another, and we cannot be too searching in our investigations, too exacting in upholding our requirements.

"If a candidate has failed to find high standards in her own State, she should meet and learn to recognize them in another. States may accept without examination those registered applicants from States having higher requirements; they should unhesitatingly reject those of States which have inferior.

"This much is open to us now: In framing our laws we may do so with distinct reference to future reciprocal relations, and in each State we should aim at establishing a standard sufficiently high to prevent its exclusion from other States. At the same time we should state with the utmost definiteness the basis on which these relations are allowed. We should know that the requirements and examinations are substantially the same and may be justly accepted as an equivalent for our own. The certificate of registration of a nurse from another State could be accepted by an Examining Board under general conditions somewhat as follows—first, that the preliminary education of the applicant and the period of education in nursing are such as the board requires; second, that the applicant must show that she has passed an examination in practical and theoretical nursing of substantially the same character as that required by this board, and that she has been fully registered. Finally, we must remember that uniformity in nursing education is our way, and only way, to complete reciprocity.

"Our efforts must be directed straight to our educational system, and we should give freely our best strength and energy to its development and improvement. It is possible that through some central body—a Central Examining Board, Advisory Board, or Board of Control—we might more speedily get at the desired basis of uniformity; but such a body can hardly be created, or work effectively even if it existed, except through a closer union of State societies than has as yet been suggested, or perhaps even thought of. When the State societies know each other better, and realize more fully not only the needs and possibilities of their own territories, but of the wider field occupied by the entire profession, it is possible that some such Central Advisory Board or Examining Board may arise naturally and that it may exercise a beneficent influence over the entire nursing body of the country. (One thing we must realize—that is, the ideals which inspire the growth of any educational work must change from year to year; they cannot remain fixed and unalterable; they must grow, and we must grow with them if we wish to be worthy of our responsibilities and really great opportunities.")

**PRESIDENT.**—After listening to these comprehensive, interesting, and instructive papers it may seem a little hard for you to come down to the reports of the State associations. We have such reports to offer you. We hope that the report of one State may show possibly the reason of the difficulty in another State, else we would hardly have the temerity to offer these reports at this time. We will now call for the reports of the State societies. These are in the hands of the secretary and she will now present them.

Reports of the State associations were read as follows: Miss Paxton, the report from District of Columbia; Mrs. Wilcox, from Connecticut; Miss McCully, from Indiana; Miss Wheeler, from Illinois; the secretary, from Louisiana; Miss Dunderdale, from Maryland; Miss Metcalfe, from Massachusetts; Miss Smith, from Michigan; Miss Damer, from New York State; Miss Wyche, from North Carolina; Miss Mapes, from Ohio; Miss Brobson, from Pennsylvania; Miss Webb, from Virginia.

#### CONNECTICUT.

"Connecticut has only made a beginning in State registration. At a preliminary meeting, held by the local graduate nurses of New Haven under the auspices of the Alumnae Association of the Connecticut Training-School for Nurses, a mass meeting was called for February 17, 1904, inviting all graduate nurses in the State to attend, the meeting to be held at the New Haven Hospital. About eighty nurses responded. Miss Palmer spoke informally on State registration. At this meeting a State association was formed. A Nominating Committee and a committee to draw up the by-laws of our constitution were appointed, to report at a meeting to be held in Hartford, May 28, 1904."

#### DISTRICT OF COLUMBIA.

"The Graduate Nurses' Association of the District of Columbia was formed in November, 1903. Miss G. M. Nevins, of the Garfield Memorial Hospital, was elected president. Miss Marian Little, of the Homoeopathic Hospital, secretary, and Miss P. E. Jennings, of the Children's Hospital, treasurer. There are one hundred and thirty members. A bill to secure registration was prepared and introduced in both houses of Congress, but no action was taken. The nurses hope to work for another and more satisfactory bill next year."

#### INDIANA.

"In August, 1903, members of the Alumnae of Hope Hospital, Fort Wayne, took steps towards the forming of the Indiana State Nurses' Association. Circulars were sent to all the training-schools for nurses in the State and notices inserted in the leading papers. On September 3 a meeting was held in Fort Wayne. Samuel M. Wayne, president of Hope Hospital Association and one of the city's most successful business men, delivered the opening address. The sense of the meeting was for immediate organization. A constitution and by-laws were drafted, discussed, and adopted, and a Nominating Committee was elected and instructed to prepare a ticket to be presented and voted upon at a meeting to be called by order of the Committee on Arrangements. This second meeting was called for November 27, 1903, at which time election of officers took place and chairmen of committees were appointed, resulting in the following: President, Mrs. E. G. Fournier, Hope Hospital, Fort Wayne, Ind.; first vice-president, Miss M. Henderson, Union Hospital, Terre Haute, Ind.; second vice-president, Miss L. Hill, 422 West Fourth Street, Fort Wayne, Ind.; secretary, Miss M. Scott, Lexington Place, Indianapolis, Ind.; treasurer, Miss F. Grant, City Hospital, Indianapolis, Ind.; chairman of Nominating Committee, Miss C. Speechly, 422 West Fourth Street, Fort Wayne, Ind.; chairman of Arrangements Committee, Miss M. Scott, 55 Lexington Place, Indianapolis, Ind.; chairman of Legislative Committee, Mrs. Bulk. Brown, Indianapolis, Ind.; chairman of By-Law Committee, Miss E. Boulton, Evansville Sanitarium, Evansville, Ind.; chairman of Credential Committee, Miss E. John-



sten, 825 Christian Place, Indianapolis, Ind.; chairman of Publication Committee, Miss A. Clark, 422 Fourth Street, Fort Wayne, Ind. About sixty members were enrolled. Dr. M. F. Porter, Fort Wayne's most eminent surgeon, and Mrs. E. G. Fournier, the newly elected president, both addressed the meeting. Indianapolis, through her delegate, sent an invitation to hold the next session of the association at that place. The invitation was accepted and February 22 was selected for the time. After a social hour spent at the Nurses' Home, adjoining the hospital, the meeting adjourned. A very enthusiastic session was held at the Grand Hotel, Indianapolis, February 22. Delegates were present from Terre Haute, Shelbyville, Fort Wayne, Lafayette, Logansport, Marion, Evansville, Indianapolis, and other places. Steps were taken at this meeting to become incorporated. Articles of incorporation were drawn up and the seal decided upon. It was also decided to divide the State into districts for the purpose of thorough organization, and circulars were distributed systematically throughout the State. The annual meetings of the organization are to be held in Indianapolis each fall, while the semi-annuals will be held north and south of Indianapolis alternately. Indiana is a little peculiar in that she has very few training-schools for nurses, although she has a very large number of nurses who are graduates from other States, so that the membership will be composed almost entirely of individual members. A lively interest is being manifested, and the outlook for a successful organization is very bright and encouraging."

#### ILLINOIS.

"During the past twelve months eighty members have been added to our ranks, making the membership to date four hundred and forty. The constitution and by-laws adopted by the society at the time of its organization were found to be inadequate to the growth of the association, and to meet the demands it was necessary that they be revised. Miss Idora Rose, Miss Katherine DeWitt, and Mrs. G. J. Fleming were appointed a Committee on Revision. Failing in our efforts to secure State registration, the next best move seemed to have published a pocket directory, to contain the name, address, telephone number, school, and year of graduation of members of the Illinois State Association of Graduate Nurses, thus furnishing doctors with substantial proof that the nurse whose name is found therein is a graduate of a recognized school in good standing. The subject of a central directory was discussed at the August meeting. The superintendents of all schools with one exception signified their willingness to transfer their directories to a central directory, providing they were assured of its proper management. The subject was discussed at length, but no action was taken. We have adopted a badge, designed by Sister Ignatius, also a motto, 'Virtute et Labore.' We consider the very best work accomplished during the year the establishing a 'quarterly' in which are set forth the minutes of the meetings, subjects discussed, papers read, and the general workings of the organization, also items of interest among the nursing profession in Illinois. Nothing we have done since our organization has met with such general approval as the publishing of the 'quarterly,' as it keeps each individual nurse informed of the proceedings of each meeting, also what the association is endeavoring to do for the general welfare of the profession. After the publication of the second number the question arose as to whether it should be continued, as the cost of the publishing was found to be more than our treasury could meet. The matter was much discussed at the February meeting, and the majority were in favor of its continuance. It was voted that ways and means for defraying the expenses without calling on the treasury be left to the Publicity Committee. The Publicity Committee have solicited advertisements, and so many of the nurses have signified their willingness to subscribe for it that it has been decided to ask an annual subscription of fifty cents and continue the publication. We have endeavored to keep alive the interest of the members and to keep before them the fact that we still have to work for State registration."

#### LOUISIANA.

"The Louisiana State Nurses' Association was organized March 18, 1904, with a membership of sixty-three, representing five of the six training-schools in the State. The membership consists of individuals and now numbers eighty.

Finding that the present legislators meet May 9 and not again for two years, we have put forth every effort and have adopted a bill to go before them this spring. We do not claim originality in our bill. It is modelled from the Maryland bill, as that is so complete and concise. However, it was deemed best to require, for the present, 'a course of two years or more.' No school here has ever required less than two years, and some now require three years. It was not intended to make a positive statement in the report contained in the May number of the JOURNAL that it 'will not be as difficult to obtain registration in Louisiana as in States where the standard is less uniform,' but we hope it will be less difficult. The ways of lawmakers are devious and not always certain. However, we have received much encouragement from high sources, and we trust that by July, if not earlier, we may be able to say, 'Louisiana has State registration for nurses.'

#### MARYLAND.

"On December 14, 1903, the nurses of Maryland, about four hundred in number, met in the assembly rooms of the Arundell Club, of Baltimore, for the purpose of forming a State society. Previously there had been several meetings of the superintendents of training-schools and presidents of alumnus associations to devise plans for the organization, and the result was that the question had been fairly well discussed. Committees had been formed to present at their meeting in December a constitution and by-laws and a possible bill. Miss Nutting, the chairman, stated the object of the meeting and introduced the speakers, Mrs. William N. Ellicott, president of the Arundell Club; Judge Henry D. Harlan, of the Supreme Bench, and Dr. William H. Welch, of the Johns Hopkins University. Each gave the nurse all possible encouragement. Judge Harlan spoke of State registration for nurses not only as a privilege, but a right—that every genuine nurse should be known from the counterfeit. Dr. Welch advised, if possible, to have the State Examining Board consist wholly of nurses. He said: 'I am quite sure that the examining of nurses is not work for the physicians. They have something to do with the training of a nurse, but, akin as the professions of medicine and nursing are, the profession of nursing requires a special knowledge possessed by the trained nurse and not by the physician.' After a short intermission it was voted to form a State association. The constitution, previously prepared by a committee, was presented, unanimously adopted, and the Executive Committee was at once elected, with Miss M. Adelaide Nutting, of the Johns Hopkins Hospital, as president. The following morning the by-laws and the bill, to be presented to the coming session of the Legislature, were presented and adopted. This same bill, with only a few changes suggested by the Advisory Board,—Judge Harlan and Dr. Welch,—was made a law by receiving the signature of the Governor on March 25, 1904—a little over three months from the first public meeting. Briefly speaking, the bill provides that after June, 1906, a registered nurse in Maryland must be twenty-three years of age, have had a high-school education (or its equivalent), and have graduated from a training-school connected with a general hospital where three years of training, with a systematic course of instruction, is given, or have received the equivalent from two or more hospitals. Ample provision is made for all graduates of general hospitals and for all having obtained an equivalent training in one or more hospitals who are already in the field. It does not prevent any person from caring for the sick, but it does make a distinction between those who have acquired their knowledge by years of systematic work and study, and those who have obtained a bit of knowledge here and there. At a special meeting of the association, held April 15, 1904, twelve names were selected as provided by the bill in Article I. From this number on May 5 five nurses were appointed by the Governor, to form the Examining Board of Nurses for the State of Maryland."

#### THE MASSACHUSETTS STATE NURSES' ASSOCIATION AND THE MEASURES TAKEN TO PROMOTE A BILL FOR THE STATE REGISTRATION OF NURSES.

"A mass-meeting was held in Faneuil Hall, February 28, 1903, in which the organization of the association was partly accomplished. June 11, 1903, the organization was continued in the meeting held in the Century Building.

Another meeting was held October 21, 1903, in the Century Building, to effect a revision of the membership clause in the constitution, adopt the by-laws, and elect the remaining officers in accordance with the constitution. January 13, 1904, the members of the association were called together in the Century Building to receive the reports of the councillors representing the county associations and the report of the Legislative Committee in regard to the proposed bill of State registration for nurses. The bill was presented to the General Court and a hearing was given by the Committee of Public Health at the State House on February 15, 1904. An opportunity was given the Legislative Committee to revise the bill, which was done under the advice of an attorney. The revised bill was referred to the next General Court by the Committee on Public Health on April 4, with no unfavorable comment, and this action of the Committee on Public Health was confirmed by the House and Senate on April 5, 1904. The membership of the association is about six hundred. The requirements for active membership are that each nurse applying for admission shall be a graduate of a recognized training-school for nurses connected with a hospital or sanitarium having at least a two-years' course in the above-named institution. She must also be acceptable to the councillor who presents her name for membership. Most of the counties in Massachusetts are represented by county associations."

## MICHIGAN.

"A mass-meeting was held in Detroit, Michigan, on May 10, 1904, for the purpose of forming a State association. One hundred and ten graduate nurses from throughout the State responded. Addresses were delivered by Honorable W. Maybury, Dr. J. H. Carstens, and Judge C. A. Kent. The organization was formed, constitution and by-laws adopted, and officers elected. It is hoped that a bill for State registration may be presented to the Legislature in January next. This bill will be modelled on the Maryland bill somewhat, and we expect to be able to tell you a little more next year than we are able to tell to-day."

## NEW YORK.

"The question of a State organization for New York State was brought before the delegates at the Nurses' Associated Alumnae Convention held in New York City in May, 1900. The day following a meeting was held at the Presbyterian Hospital and a Committee on Organization appointed, which called a mass-meeting in Albany the following April, when the State society was organized. Both individuals and societies are eligible for membership, with the expectation that ultimately the county society will be the unit of membership. A Legislative Committee was appointed to prepare a bill, which was submitted to the association, and after being thoroughly discussed was introduced in the Legislature in March, 1903, and became a law, receiving the Governor's signature in April. The licensing of nurses is placed in the hands of the Regents of the University of the State, who control all educational matters. They appoint a board of five nurse examiners, on whose recommendation the applicant is licensed. The registration of training-schools is also in their hands, no school being registered unless it comes up to a certain standard. A hospital maintaining a training-school must be incorporated, and a standard of requirements for the hospital itself is now being worked out. Inspection of all registered training-schools in the State will also be undertaken. The association has now about two thousand nine hundred members, holding two meetings each year—the annual meeting in Albany in April, and an autumn meeting in some other city."

## NORTH CAROLINA.

"The North Carolina State Nurses' Association was organized on October 22, 1902, with about thirty-eight members. A bill providing for State registration of nurses was secured March 3, 1903. We now have fifty members, and are to hold our second annual meeting the last of this month, when we hope to take the following steps: The adoption of a uniform curriculum with three-years' course and little pay; the establishment of a six-months' preparatory course for nurses at our State Normal and Industrial College; a committee to secure revision of our bill if possible."

## OHIO.

"The Ohio State Association of Graduate Nurses (incorporated) was organized in Cincinnati January 27 and 28. At the meeting on January 28, after the adoption of the constitution and by-laws, a bill to be presented to the Ohio State Legislature at its present session was read and adopted. This bill with some alterations was on the lines of the bill prepared by the Maryland State Association of Graduate Nurses. The Committee on Legislation reported that after a careful study of existing bills relating to State registration for nurses the Maryland bill, in their judgment, demanded the highest educational standard, and also gave the State association the power to select a number of desirable candidates from whom a Board of Examiners could be appointed; they therefore recommended the adoption for the Ohio State Association of a similar bill. This bill was submitted to eminent legal opinion and under the Constitution of Ohio was declared unconstitutional on two counts: First, because it limited the appointive power of the Governor, and, secondly, because no woman can hold office from the State, with or without emolument. It being too late to prepare a new bill before the close of the session, and a bill which must cover all essential points, the matter has been deferred until the next meeting of the State association, in October, 1904, when further efforts will be made and plans for forming local and county associations for graduate nurses discussed."

## PENNSYLVANIA.

"The first movement towards the organization of a State society in Pennsylvania was made by the alumnae of the Hospital of the University of Pennsylvania. They called a meeting of the nurses of Philadelphia on April 18, 1903, at the University Hospital. It was decided at this meeting that a committee of twenty-five from representative hospitals and their alumnae should be appointed to continue this work. The result was the effecting of a preliminary organization in Philadelphia on June 8 and 9, and its establishment on a permanent basis in Pittsburgh on October 5 and 6, 1903, by the nurses of the State. Since then the list of members has grown to between three and four hundred. A constitution and by-laws have been adopted, a charter will be applied for within the next three months, and a bill enforcing registration of nurses will be presented at the next legislative session. Feeling the almost vital necessity of comradeship and good-will among ourselves, and a clear comprehension on the part of the public of our needs, we have been content to use this, our first year, mainly in educational work. To that end we have had frequent meetings, at which the discussions and the papers read have been of wide-reaching interest, not only to nurses, but to the laity as well. The intelligent sympathy, the hearty coöperation of different social, educational, and professional bodies, and the general good-will which have met us on every side induce belief in the wisdom of our decision to 'make haste slowly,' and we hope that we may deserve and receive the continued sympathy and support of each and every one in the coming year."

## VIRGINIA.

"The Graduate Nurses' Association of Virginia sends her delegate to you to-day with a report of the work that has been accomplished in the State in the past year. The law regulating our profession, which went into effect in May, 1903, thus far has proven of interest and of great benefit, not to the nurses alone, but to the physicians and, most important of all, to the public, who have long felt the need of this protection. During the last Legislative Assembly our law has been threatened from two sources only with amendments—once through political friends of pupil nurses of a private hospital, and once again by a female physician connected with a colored training-school, who endeavored to have amended the seventh clause, which regulates the title of "R. N.," but by the hard work and diplomacy of our invaluable president both of these disturbing elements were defeated, and it is with great pleasure that we announce to this assembly that we have passed one year without harm, and the Virginia nurses State law remains intact to day. As yet we have not been subjected to a State license, though we cannot hope to keep free from this tax many years. The State Board of Examiners have done good work. They have received three hundred

and forty-four applications for certificates, for which two hundred and twenty-six certificates have been issued, the remaining one hundred and eighteen being held for investigation by the board, which convenes May 27 and 28. The Executive Committee of the State association has under consideration a plan for the establishment of a course in domestic science in some college, or normal or high school of the State, and will require all applicants to training-schools for nurses to present a certificate of graduation from this department. A plan also for the establishment of a nurses' sick benefit fund has been laid before all the local societies of the State, and at our annual session, to be held May 24, 25, and 26, we hope that these plans and many others for the advancement of our schools will be perfected. We consider ourselves fortunate, indeed, that in the pioneer days of nursing in the Sunny South we had as our leader and adviser a woman of force, power, and inspiration, who has always held before us, by word, precept, and example, a standard which her followers will ever labor to attain, and for what has been accomplished by the nurses' State association of Virginia all honor is due the president of this association, Miss S. H. Cabanisa."

**PRESIDENT.**—I would suggest to the different alumnae associations represented here by delegates that it might be a help to the chairman of the Committee on the Purchase of the JOURNAL if she could receive from each alumnae association its wishes expressed in the matter upon a slip of paper. We are now adjourned to meet to-morrow morning at ten o'clock in this hall.

*Third day, Saturday, May 14, 1904—Morning.*

Meeting called to order at ten A.M., the president in the chair.

**PRESIDENT.**—We will call for any announcements that the secretary may have to make.

The secretary reported as follows:

"At the meeting of the Executive Committee, held at the Drexel Institute May 14, 1904, the Philadelphia and the St. Joseph's Hospitals of Philadelphia were admitted to full membership. The Dr. Price Alumnae was not found to be eligible for membership in the national association; the Lebanon was placed on file pending further correspondence. The committee would remind you that when the national association was organized it was decided that New York should be considered as the headquarters, but that occasionally invitations to visit large nursing centres should be accepted. These invitations have been accepted now for several years.—Buffalo in 1901, Chicago in 1902, Boston in 1903, Philadelphia in 1904,—therefore the committee would recommend that the association come home in 1905."

**PRESIDENT.**—This brings us to that section of our programme known as "Central Directoria," which was given, as was that of yesterday, to a member of the alumnae association, and is in charge of Miss Helen W. Kelly, of the Illinois Training-School. I have great pleasure in presenting to you Miss Kelly, who will give you this programme.

**Miss KELLY.**—I feel that I very inadequately fill Mrs. Hutchinson's place, but am very glad to do anything in my power to further the interests of the association, and shall call upon Miss Ahrens to give the paper prepared by Miss MacMillan.

Miss Ahrens gave Miss MacMillan's paper as follows:

*(Registry)*  
"CENTRAL REGISTRATION."

"Central registration may be a good thing, provided it comprises much beyond mere registration, which of itself is not of sufficient im-



portance to call forth unusual effort to obtain. In fact, there may be some objections to a registry other than one connected with a school where several hundred women place their names and receive calls. The woman in charge of this is apt not to be familiar with the strong and weak points of each nurse, thus at times placing nurses on cases where they will do justice neither to themselves nor to their patients. Among so large a number the deficiencies of the nurse who is anxious to get through life as easily as possible are liable to be overlooked, which cannot fail to react against the woman of irreproachable professional reputation whose name is on the same list, and to lower the general standing of the registry. The same weaknesses are found in school registries, but these are held somewhat under control by the smaller size of the list and the more complete knowledge of the record of each member enrolled.

"The central registry is of assistance to the nurse starting work in a town other than that in which she graduated by giving her an opportunity to make a beginning. It is also a convenience to the second- or third-rate nurse whose own school registry knows her so well that it hesitates placing her on cases similar to those in which she has already failed, and in consequence of which she feels aggrieved. To the good nurse it makes little difference where she registers, for when once started she is in demand and is frequently independent of registration. If the physician and public are to be considered, a central registry is of no special convenience to them. The school registries serve these as well if not better, and if central registries be organized, we would have to educate them to apply there.

"The removal of nurses' registries from the hospitals would be of the greatest possible relief to superintendents of nurses' schools, who are already overburdened with duties and weary of hearing complaints from nurses dissatisfied with work superintendents do merely because these nurses show neither ambition nor ability to do it for themselves.

"Central registration may be a debatable point, but there would seem to be no doubt that the management of her registry should be, through her alumnae, in the hands of the nurse herself, who so far has refused to recognize her responsibility and has left the burden to be carried by her school as best it could. If she would take up this, her rightful task, she would at least be relieved of the reproach of duty neglected; she would have the opportunity of controlling affairs which it is her privilege to control, and of at least adopting that policy she has so long advocated.

"It is the private-duty nurse who will be benefited or injured according to the degree of success or failure with which the registry meets,

and should therefore regulate its policy; and it is she who should gain by that process of development coming from responsibility assumed.

"Granted that each alumnae should take care of its own registry, it would be a simple step for the several alumnae to combine, and instead of two, four, six registries, have one large, central one. If this combination were for registration alone, it would not seem advisable, the smaller registry being better able to care for its members.

"Should, however, on the other hand, central registration be only one feature of a large scheme, in which by combination nurses may have club-houses with reading-rooms, bed-rooms, common kitchen and dining-room, with a gymnasium if they wish it, lecture courses, and other privileges, which will improve their method of living, add to their happiness, and be an inspiration towards better work, then it is well worth the necessary effort.

"As the accomplishment of such a work requires organized effort, if this were not brought about by the union of local alumnae, it would seem reasonable to suppose that the local association might be utilized for the purpose. The Board of Management of the registry, appointed from among the members of the local association, would assume all responsibility, it in turn electing its Executive Committee to come in closer contact with the work, this committee to supply rules and enforce their obedience, to select and assist the officer in charge, to keep in constant touch with its development, and to report results to its board.

"The officer in charge should be, preferably, a nurse. She alone understands the ambitions and attitude of the nursing profession, and, naturally, she must be a woman of broad mind, perfectly impartial towards individuals and schools.

"Without doubt, as in all new enterprises, mistakes will be made in the management, by which the individual or the registry itself may suffer, but these should not be of a grievous nature. There are now in the nursing profession enough old heads who know what the nurse needs, who are capable of leading, and the younger women will do well to recognize their knowledge and be willingly guided.

"It would seem that the question at stake is not whether nurses can make a success of central registration,—nurses can do anything they undertake,—but whether it is worth their while to attempt it. In its best and broadest form it would seem worth while, for it means a union of nurses to bring about, by their own efforts, changes which will at once develop the nurse by the effort she puts forth to do for herself what is now being done for her, and which will ultimately give the nursing profession a position in the eyes of the public which, so far,

it never has held, and will fail to hold until nurses organize themselves into a body of self-regulated and self-governed professional women.

"If central registration brings us one step towards this ultimate goal, its accomplishment would be progression, and therefore beneficial."

Miss Kelly then introduced Miss Balcom, who read the paper prepared by Miss Phillpotts:

**"A CENTRAL DIRECTORY FOR NURSES AND HOW BEST TO MANAGE IT."**

"That registries for nurses have come to be a necessity in all large cities is, I think, almost universally acknowledged. Of course, there are some who still contend that such institutions are not needed in the community; that each hospital has its own list of nurses or regular registry, where the names of the graduates with their addresses is kept and where they can be found at any time. This is true, but those who have at all studied the subject or considered the present condition of things will, I think, admit that regular registries for nurses are not only an advantage but almost a necessity to the nursing profession. What kind of registries, and how best to manage them, is the question to be considered at present.

"Is it advisable to have a number of registries in different parts of a city, each conducted in its own way, or is it best to have one central registry where the names of all duly qualified nurses of all the different hospitals in good standing can be found at any time? It seems that there can be but one answer to this question. The great advantage of having one central place where the name of any graduate nurse in good standing in her profession can be found on the shortest notice must commend itself to all thinking people. This is an age of centralization, everyone is so busy, so little time seems to be available for what we have to do, that we are constantly obliged to plan how we can best arrange things so that our work may be carried on to the best advantage in the least possible amount of time.

"If there were one central directory in each city wisely managed, and where a record of all reputable and properly qualified nurses were kept, one can readily see the great saving of time and trouble it would mean for both patients and physicians, especially the latter, and also the benefit that would result to the nurses themselves.

"We all, I think, realize that a nurse is very readily forgotten by both patients and physicians, but especially the latter, nor can we wonder at that when we consider the many anxieties and the intense nervous strain of a physician's life.

"Frequently a physician is very well satisfied with the work of a certain nurse. She may be an entire stranger to him, she has not been trained in a hospital where he serves, she is not familiar to him, but her work has been satisfactory in every respect. When she leaves the case he compliments her on the way she has handled it with its various and difficult features, and he tells the nurse that he will be glad to have her another time; frequently he even asks for her card, which she is glad to give him, naturally expecting to hear from him again. Months after the nurse may meet the same physician, who greets her cordially and remarks that he has several times wanted her for certain cases, but that he had lost her card and had no idea where to find her. If there were one central directory such mistakes need not occur. A physician could call up the directory, mention the name of the nurse he wanted, and he could at once be put in communication with her, or at least be told whether she were available for a case or not.

"Besides the mere convenience of this system, a well-organized central directory would be a guarantee of good faith to the general public.

"No nurse should be found on the directory unless she were properly qualified in every respect. The fact that a nurse was able to register at the central directory would be proof that she was a graduate of a hospital in good standing, and also that she herself held credentials as to her character and her personal fitness for practising her profession; thus both physicians and the general public would feel that a nurse procured from the central directory was reliable in every respect.

"Having granted the advisability of a central directory, we next ask the question, Who is the person best qualified to carry on such an undertaking? Shall it be a graduate nurse, or a business woman, who, of course, has had no especial training in hospital work and cannot be expected to enter fully into the requirements of either nurses or physicians?

"It is urged by a number that so few nurses have any business ability; they are careless in their business methods, biassed in their opinions, hasty in their judgments, and, in short, not suited to take hold of such a business enterprise. A business woman, on the other hand, has herself well under control, she has been trained in business methods, is accustomed to handle the public, and in every way is better suited to take charge of such an enterprise.

"I know that there is a great deal of truth in all this, and I have in mind a most excellent directory for nurses managed wisely and capably by a woman untrained, indeed, in hospital work, but, guided by her tact and an intuitive knowledge of human nature, she has been singularly successful in managing a directory for nurses.

"It must be conceded that many nurses are, unfortunately, very poor business women; their irregular and uncertain life is not apt to foster or develop their business faculties, and they are, especially those constantly doing private duty, in great danger of becoming very narrow in their views of life. All this must be admitted by any unbiassed observer. Happily, however, every nurse is not unfitted for conducting a business enterprise. We have numerous examples of nurses who have been most successful in a business career, and have demonstrated that their training in the hospital has given them a breadth of view and a large tolerance, combined with orderly methods of business, that make them singularly suited for almost any legitimate business, particularly for conducting a directory for nurses.

"It is impossible for any but a nurse to understand or enter fully into the requirements, feelings, and perplexities of a nurse's life. None but a nurse realizes the tremendous strain which nurses are constantly working under, all the small irritating things that they are hourly encountering which take the life and spirit out of them, and also the danger that they are in of becoming simply money grubbers. Only a woman who has encountered the same difficulties and faced the same problems can realize what the daily life of a nurse is, and she is the one best qualified to warn nurses of their shortcomings and assist them by wise and sympathetic counsel. It is undoubtedly true that a competent business woman would make a better manager for a directory than an unpractical nurse, but, all things taken into consideration, I believe that a capable, progressive, broad-minded, and practical nurse is the woman best fitted to successfully conduct a central directory for the nursing profession."

The section on Central Directories was closed by Miss Fay reading the paper on the subject prepared by Sister M. Ignatius Feany.

"Sitting in the restful twilight, when the busy day is ended, it is well to go out of self and think of the welfare of others.

"To-night our thoughts wander out through the big, busy city of Chicago. We glance at the palatial residences abounding in all the luxuries that wealth can procure, onward our thoughts wander into homes of plenty, and still onward down to the abodes of poverty, misery, and want.

"One element is found to exist throughout all the phases from extreme wealth to extreme poverty; none can escape the sentence of the Great Creator—'It is decreed for all men once to die.' In consequence of this decree all the children of Adam must suffer the ills of the human race, among which the heaviest are sickness and death.



"This same Father, who loves all His children, wishing to encourage them to love and aid one another on all occasions, gave us this lesson, 'Blessed are the merciful, for they shall obtain mercy.' Among the works of mercy the care of the sick holds a prominent place and has been promised a special reward in the life beyond the grave. Nurses are blessed to rank among those called to follow the example of the Good Samaritan by helping their neighbor in the time of need.

"Thus it is that when the dread visitors, sickness and sorrow, enter a household, the afflicted one is the object of all anxiety and interest; the members of the family turn all thought to the care and welfare of the afflicted one. They at once call a man skilled in the healing art, that he may by his knowledge advise the remedies that possess the power to destroy the disease which threatens the life of the loved one.

"Whilst health dwelt in that household, peace, joy, and harmony reigned; now sorrow, care, and anxiety fill all hearts with solicitude.

"The medical adviser sees the family needs the aid of a skilled hand, a thoughtful mind, a will to act, with consciousness of soul. All these qualities are expected to be found in a woman trained for such trying emergencies; such a person the trained nurse should prove herself to be when called into a home in those soul-trying circumstances.

"The afflicted people request their doctor to send or recommend such a person, and the nurse is needed at once; any delay may be dangerous, and the arrival of the nurse is looked for with the utmost anxiety. The doctor telephones to Miss A.; her 'phone is out of order and he gets no answer. He then tries Miss B. Someone informs the doctor 'Miss B. is out; do not know when she will return.' He then with a sigh refers to his note-book for the address of Miss C. He calls her; she has just gone on a case. The doctor by this time begins to whistle. He again refers to his memorandum of nurses and calls Miss D. Yes, she is in, but cannot take his case, as she is engaged by Doctor So-and-so to take a case for him to-morrow. In despair the doctor calls up the superintendent of the hospital training-school, wants her to send him one of her best pupil nurses, as his patient needs immediate attention. The superintendent tells the poor doctor that 'The Illinois State Association does not allow sending out pupil nurses.' He is by this time in a frenzy of impatience and wants to know what the Illinois State Association has to do with it. The superintendent takes refuge behind the bulwarks of the society which has done this good work for the pupil nurse, as it secures to her her full term of training in hospital instead of being sent out to care for patients before she is fully equipped for such responsibility.

"The superintendent after much delay secures a graduate nurse for the case.

"A doctor told the writer that not long ago he sat three consecutive hours at a telephone trying to get a nurse to go into the country. He said he would not have had the patience to do it for himself, but a friend in the country had asked him to send him a good nurse as soon as possible. It was the desire to oblige his friend that gave him the perseverance on that occasion.

"This and similar circumstances occurring daily bring before the intelligently-thinking mind the need of a central medium by which all nurses may be reached at all hours of day and night.

"A lady in this city has managed such a concern for some years, and on close inquiries we fail to hear of any partiality or injustice on the part of the registry management, notwithstanding some one hundred and fifty or two hundred nurses have been registered at a time.

"In this great, busy city, now so populous and extending over so vast an area, and its seventy-odd hospitals and twenty-one training-schools represented in the Illinois State Association, and its hundreds of nurses trained and untrained, it certainly is time a central registering place should be established. When this subject was discussed at a meeting of the Illinois State Association there was much said in its favor, but a few schools objected. Those schools, we are informed, have since changed their views on this subject. The chief objection now comes from individual nurses, who fear they may be slighted. We know of nurses out of the training-school only a few months and others out for years, and they are kept busy all the time, or as nearly so as a nurse can be, by doctors not of their own school, and by men they had never met at their own school. Those nurses have, by their energetic efforts to please the doctors, taken good care of the patient and won for themselves the highest commendations of doctor, patient, and friends.

"Each nurse must endeavor to become all that she is expected to be. The qualities she should possess have been so frequently spoken of and written about that we will not reiterate them here. We simply refer to the well-known lines of Sir Walter Scott,—

'Oh woman, in our hours of ease,  
Uncertain, coy, and hard to please.'

This depicts woman in her whimsical moods, when she too is at her ease and free from care. Let us examine and study the change in womanly personality and character when the occasion calls for strength, courage, and fortitude. The poet goes on to say,—

'When pain and anguish wring the brow,  
A ministering Angel thou!'

"Let each nurse study—yes, *study*—to become to her patient a veritable ministering angel; then no one can deprive her of her patients, and doctors will always want her, and no substitute will fill her place when she is available.

"On this vast Continent of America, traversed as it is by a network of railroads and steamships, transacting an almost incredible amount of business and commerce, foreign and domestic, by means of telegraphy, the wireless or cable connecting the two hemispheres and uniting the Atlantic and Pacific slopes, thus simplifying and quickly dispatching business that would otherwise be slow and cumbersome, let the nurses learn the lesson of unifying the now complex, unsystematized manner of furnishing nurses; let one central station be established in the business portion of our city with an efficient corps of bright, business-like women to manage it, having enough help to attend faithfully to the work at all hours of the day and night.

"The subject may be settled by discussion as to how and by whom the registration shall be managed. The doctors all favor the idea, as the labor of securing a nurse will be greatly simplified.

"Let the rooms be for the nurses a place that they may call their own, where, retiring from the busy thoroughfares, they may enjoy the restful comfort of a chat with their sister nurses or meet friends; after a time a library may be furnished and general reading-room; luncheons may also be served and special meetings held—in fact, let them be a general rendezvous for nurses and all business regarding the nursing profession, registry fee covering all expenses.

"The thoughts expressed in this paper are only suggestions to call forth argument, or the use of reason to produce conviction; in other words,—

"'A beam in darkness; let it grow.'"

**PRESIDENT.**—This concludes the programme for the morning upon this subject. It would hardly seem fair to those who so ably prepared this programme to pass it by without allowing you some opportunity to ask a question and receive an answer, although we have not time for much discussion. I will therefore give you an opportunity now to present questions upon this subject, and I feel very sure that those who have given it so much time and attention will be glad to answer them.

Then, if there is no question, we will pass on to our next item of business upon the programme, which will be considered in executive session. Therefore we will ask the visitors to retire at the close of some announcements that may be made by the Committee on Arrangements.

#### EXECUTIVE SESSION.

Meeting called to order by the president.

Roll-call by the secretary.

The secretary again made report of the Executive Committee meeting.

PRESIDENT.—Will you take some action now in regard to the meeting place of the next annual convention?

It was moved by Miss Ross and seconded by Miss Dunderdale that the next convention be held in New York City.

MISS GREENLEES.—Washington has wanted the national association to meet there for a number of years, and they extend the same invitation for next year. We have been very patient, and we have voted for these other cities and voted for Philadelphia this year. We give the same invitation now that you come to Washington next year and then you can go home to New York the following year.

MISS DAMER.—I am very much in favor of the association going to Washington. I think that we should go there; I think that it has been a great advantage to the association to go about; we have more than doubled our membership since we left off going to New York City all the time. Every time we move in another direction we bring in from five to eight new societies. I think that we have got in nearly all of the New York societies now, so that there will be nothing to gain by going there, but I really think we should go further south, and Washington would bring us nearer to a great many of the Southern societies and hospitals that have not come up this far north, but would come to Washington. Then there is another city that ought to be considered also, and that is Detroit. The societies there have been among our earliest members and we want to work for Michigan and Ohio. We want to go in that direction. I am in favor of going to Washington next year.

MISS MCISAAC.—I think the only objection to going to Washington is that it would certainly be a tax upon the hospitality of Washington, Maryland, and Virginia to ask them to have two nurses' conventions there inside of six months. I think it would be better to postpone our visit there for another year.

MISS GREENLEES.—The entertainment of the societies will not overtax Washington. We are perfectly willing, able, and capable to entertain both societies, and on account of our registration bill, which comes up next year, we need all these things; we need the inspiration, we need the work, and we need the help that the national association will give us there.

MISS DAVIS.—I would merely like to say that we are very glad that we have a home and a headquarters in New York, and we would be very glad to go back to it when we do not find any other States willing to entertain us. When they do invite us I think it is our duty to go. We are supposed to move around for educational purposes. It is a very good chance, I think, to go to Washington, because they feel themselves weak and few and they need our support, and it would be a very wise thing to do; they know themselves whether or not their treasury is full enough to entertain us. I do not think the Superintendents' Society will require very much entertainment. They do not want it or ask it or need it.

On motion of Miss Greenlees, seconded by Miss Jennings, it was voted that the next annual convention shall be held in Washington.

PRESIDENT.—We will now pass on to the consideration of the constitution, which has been placed in your hands. I will ask the first vice-president to take the chair.

CHAIRMAN.—We will now call on Miss Riddle, chairman of the Committee on the Revision of the Constitution, to make a report.

MISS RIDDLE.—The report I furnished you yesterday is the report of our

work and what we have been trying to do. I will say further, by way of repetition, that the constitution was fixed last year, so that we have but the by-laws to attend to to-day, some of which were voted upon last year and accepted as a part of the law for the government of this body. We stopped at the eligibility clause. You have the constitution in your hands and it is unnecessary for me to read the clause on eligibility.

Moved by Miss Giles, seconded by Miss Yocum, that Article I. be accepted.

After considerable discussion, on motion of Miss Nutting, seconded by Miss Palmer, it was decided that after the word hospitals on the third line the words "or include a term in a recognized technical school" be inserted in Article I. of by-laws.

Moved by Miss Frederick, seconded by Miss McLaughlin, that the article be accepted as amended. Carried.

MISS RIDDLE.—If you will recall, or if you have the annual report of the proceedings at the last convention, you will remember that we passed the by-law on membership last year, so that we have nothing to do with that to-day.

On motion of Miss Yocum, seconded by Miss Smith, Article III., on annual meetings, was accepted as printed.

MISS RIDDLE.—I have only to make the same remark concerning By-Law IV. that I made about By-Law II., that it also was decided upon last year; the reason that we could so decide was because it did not interfere with eligibility.

CHAIRMAN.—We will now pass on to the next article, or By-Law V., the Board of Directors.

MISS DAMER.—In order to bring this up for discussion I will move that this by-law be accepted as printed. Seconded by Miss Rosa.

MISS RUSSELL.—I would move that the first section of By-Law V. be amended to read that of the six Board of Directors two shall be elected annually—that is, six the first year, two to serve for three years, two to serve for two years, and two to serve for one year.

MISS RHODES.—I second that amendment. Carried.

On motion of Miss Silver, seconded by Miss Frederick, By-Law V. was accepted as amended.

CHAIRMAN.—We will now go on to By-Law VI., on membership.

Moved by Miss McLaughlin, seconded by Miss Milne, that By-Law VI., on membership, be accepted.

MISS RIDDLE.—I would like to move that By-Law VI. be amended to read thus: that the word "organization" be stricken out and the words "affiliated associations" be inserted instead.

Seconded by Brooklyn. Carried.

MISS DAMER.—I move that Section 5 of By-Law VI. be amended to read as follows: By crossing out in the second page "excepting charter members," so that it will read: "Permanent members shall bring credentials from their organizations. After attending three consecutive annual meetings they shall be entitled to vote and shall be eligible for reelection as delegates or officers at any time. Charter members shall be entitled to vote."

Seconded by Miss Bohling and carried.

MISS PALMER.—I move that the section as amended by Miss Damer be accepted as read.

Seconded by Miss Rhodes and carried.

MISS RIDDLE.—I would like to make the statement that the question of honorary membership was settled last year.



On motion of Miss Davids, seconded by Miss Smith, the by-law as printed and amended was accepted.

Mrs. ROSS.—I move that By-Law VII. be accepted as it reads.

Seconded by Miss Dunderdale and carried.

On motion of Miss Ross, seconded by Brooklyn, By-Law VIII. was accepted as printed.

On motion of Miss Smith, seconded by Miss Knight, By-Law IX. was accepted as printed.

Miss Ross.—I would like to make an amendment to By-Law X. by adding one more committee as a standing committee, the Committee on Nomination.

Miss PALMER.—A Nominating Committee is never a standing committee.

Miss Ross.—Well, my point is to give the Nominating Committee time to work; if you do not appoint it as a standing committee, let it be appointed a year ahead. I withdraw my motion.

Miss DAMER.—I move that we accept Article X. as it stands. Seconded by Miss Greenthal and carried.

Miss McISAAC.—I move that we suspend our consideration of the constitution and take it up as our first business this afternoon, and call for the report of the Periodical Committee.

Seconded by Miss Gardner and carried.

Report of Special Committee on Purchasing Periodical, given by Miss Damer:

"Your committee met with the directors of the JOURNAL and found that there was no desire on their part or that of the stockholders to relinquish its management, except that, understanding that they assumed it for the association, they feel under the obligation to turn it over whenever the association is ready to undertake it. The stock is held at a high figure and is considered a very profitable investment.

"Conferring with the delegates, we found that many of the societies were willing to buy shares, some for themselves and some which they would give to the national association, but the majority were in favor of allowing it to remain in the hands of its very able management for the present.

"Your committee, therefore, would recommend that the remaining twenty-eight shares of stock be bought by the association or by the individual alumni societies."

Miss McLAUGHLIN.—I move that the report of the committee be accepted.

Seconded by Miss Paxton and carried.

1904  
Miss DAMER.—I would like to introduce a resolution "That it is the sense of this meeting that the national association at this time buy out THE AMERICAN JOURNAL OF NURSING."

On a call for a vote by the president sixty-five appeared as for the resolution and thirty-nine against it.

Mrs. ROSS.—I move that we adopt ways and means of acquiring the twenty-eight shares of stock to begin with.

Seconded by Miss Goodrich. Carried.

Mrs. ROSS.—I now move that a committee be appointed by the chair to consider the ways and means of acquiring the twenty-eight shares of stock.

Seconded by Miss Paxton and carried.

PRESIDENT.—The chair appoints the same committee that was appointed yesterday.

We will now adjourn until two o'clock this afternoon.

*Third day, Saturday, May 14, 1904—Afternoon.*

Meeting called to order by the president at two o'clock.

PRESIDENT.—We will continue our programme for the afternoon, and present to you an address, "The Pioneer Work of Alice Fisher in Philadelphia," by Miss Marion E. Smith.

"There was but one answer I could give to the invitation to read a paper on Alice Fisher, a subject so near to my heart, yet I feel I ought to begin with an apology for its crudity, which I trust, however, you will pardon on the grounds of my having very little time to give to it. But where to begin and how to stop I hardly know. The committee who asked me remarked that it would be easy for me to write an address on Miss Fisher, because I knew her so well; but that is just what makes it difficult—there is so much to say. She was so many-sided and so unusual a woman that to attempt a description of her seems almost hopeless. Dead. Alas! Sixteen years on the third of June. She lives in the hearts of those who loved her as vividly as though she were yet with them. I will endeavor briefly to outline her life and work, and then pass on to herself as I knew her. You will forgive me if I here quote from what has already been written, as it would be necessarily much the same, and is better said than I could say it:

"She was born in Greenwich, England, June 14, 1839, and was the elder daughter of the late Rev. George Fisher, R.N., F.R.S., whose father was head-master of Eton College. During her father's long illness she was his faithful attendant, and from that service she became impressed with the belief that her mission on earth was the care of the sick and unfortunate.

"She was trained at St. Thomas's Hospital, London. Then she was assistant superintendent at the Royal Infirmary, Edinburgh. Afterwards she was superintendent of the Fever Hospital at Newcastle. Then she became superintendent of Addenbroke's Hospital, Cambridge, where she remained five years.

"From there she went to Radcliffe Infirmary at Oxford. She then became superintendent of the General Hospital, Birmingham, and from there came to the Philadelphia Hospital, accompanied by Miss Edith Horner as assistant."

"Dr. White, in writing of her, says:

"During the years she spent here she saw order and neatness and cleanliness replace disorder and slovenliness and filth; she saw an intelligent and beneficent system evolved from a chaos of ignorance and neglect; she saw a largely increased population taken care of with a

decreased mortality, and with a simply incalculable addition to their comfort and happiness and self-respect.

"She saw her pupils going from this hospital to take positions of honor, and to spread her teachings in all parts of the country; she saw, in other words, the work to which she had consecrated the last years of her life, and to which she had given herself with such intensity of purpose and self-sacrifice, placed upon an enduring foundation, and realized that she had here an imperishable monument.

"It is not too much to say that her devotion to this work materially shortened her life. After she learned that she had an incurable disease of the heart, in which none knew better than she the importance of mental and physical rest, she was as energetic, as devoted, as unsparing of herself as ever. With every comfort and luxury of life awaiting her at the hands of kind friends nearby, and of loving relatives at home, she deliberately preferred to stay here to carry on her work, and to die in harness.

"In her death this hospital and this city has suffered an irreparable loss. Her work was extraordinary, both in its amount and in its quality, showing a masculine force and breadth of understanding, with a feminine tact and insight into character, which made her one of the moving forces of any community in which she lived, and which places her among the remarkable women of her time."

"It was my good fortune to be one of her pupils for a year in the General Hospital, Birmingham, England, and afterwards in the Philadelphia Hospital for two years. Her gracious presence, her charming, courteous manners, and her gentle mind made me her devoted admirer at first sight. Shall I try, vainly, I fear, to describe her? My words are as inadequate to make you see her as she was, as though I described a sunset to someone who was blind, or wrote the notes of a song sung by a glorious voice for a deaf man to read, with the expectation that he could fill in the beauty of the human tones by imagination.

"Almost six feet tall, very slender, a cultured gentlewoman, with true Saxon golden hair, and a low, musical voice, she was very striking in appearance, and possessed to a greater extent than anyone else I have ever met personal magnetism, which enabled her to sway easily the large number of people she governed in any direction she wished. Her ideals were so high, her tone so lofty, her atmosphere so pure, her own life so consistent, one scorned to stoop to the petty things tolerated by other people, and so she brought out the very best in all of us, and constant striving to be what she would have us became a pleasure and a habit. She called forth earnest and lasting affection from her pupils, and wherever she lived was surrounded by a group of sincere friends, proud

and glad to do anything she asked. We were truly ruled by a loving hand. Her influence rests with us, and her impress upon the characters of many will last until death, and after.

"She was merciless and stern to the evil-doer until she was sure repentance was genuine, when she became once more the gentlest and tenderest of women, always ready to sympathize and assist. She had the faculty—somewhat rare in these days, I think—of making people believe in her thoroughly. From her decision there was with her pupils no appeal. We accepted it—in our hearts, I mean, of course—as just and right, and loyalty was easy, for we not only loved her, but respected her. While she was a strict disciplinarian, she had that sweet reasonableness which caused her to know when to relax.

"She was not afraid of hurting her personal dignity by unbending to her subordinates at the proper time, and yet I venture to say no one ever dared to grow familiar as a result. Let me quote Mr. R. C. McMurtie, who was for many years a member of the Board of Charities:

"'Doubtless there have been persons as accomplished in her art, though none more so, but it was her character that carried her through. Firmness, without a tinge of obstinacy; gentleness, as great as that of the most tender of her sex; high breeding, intellectual capacity, and education fitting her as a companion for the highest, the most refined, combined with perfect knowledge of the art—profession, it deserves to be called—and an enthusiastic devotion to it, so that she preferred to live in this hospital rather than in the society of the advanced thinkers of England, and to die here rather than with her own family; these are the grounds of her remarkable success, and on these was built up her noble reputation. That the common judgment ratified the choice for the foundress of this most beneficent institution, the Training-School for Nurses of the Philadelphia Hospital, was proved by the long line of sorrowing friends of all classes that followed her to the grave, a stranger without one connection of blood on this side of the Atlantic.'

"She was invariably altruistic. When I was a pupil in England I went to her room one evening rather later than usual to find her absent, and I was told by her assistant that she was in one of the wards, and was going to sit up all night with a young girl with phthisis, who had asked for her and who was afraid to die alone. Tell me, do many heads of hospitals come so near to their patients as this? Next day she was as busy as ever, and made her rounds of three hundred beds as cheerfully as though she had rested all night. She loved her work better than anything else, and inspired us with a love and reverence for it too, and this, I think, was one great reason for her wonderful success.

"A few days after the great fire of 1885 in the Philadelphia Hospital one of the insane patients (temporarily housed in the women's out-wards) set fire to a bed, and Miss Fisher considered extra vigilance was necessary. Taking two pupils from the school, she went with us on duty and through the long night made rounds at intervals with a lantern, bringing quiet and order by her presence, as she always did, until at last, towards early morning, we persuaded her to go to bed. As I went with her in turn, again and again Longfellow's lines on Florence Nightingale came into my mind:

" 'Lo, in that house of misery,  
A lady with a lamp I see  
Pass thro' the glimmering gloom  
And shine from room to room.

" 'As if a door in heaven should be  
Opened and then closed suddenly  
The vision came and went,  
The light shone and was spent.'

"She had a way, after some of us had left the hospital, of writing and asking us to 'come and spend a happy day' with her. One I remember well. A colored pupil arrived, and her coming caused a good deal of feeling among some of the nurses, who declared they would not sleep in the dormitory with her. What did Miss Fisher do but take her into her own bedroom and let her sleep in the bed of Miss Horner, who was absent. This so effectually shamed the nurses that the commotion promptly subsided. She constantly impressed upon us the force of example and personal influence. She would say, 'You had better not do that; you must be doubly careful; remember you are no longer a private individual,' and while she was far from being prudish, she was full of fun and often witty, with a keen sense of humor.

"She was most careful in all she said and did. She enjoyed difficulties, and the greater the obstacle the better she liked it, persevering until it was overcome, though it took many months of hard work. When a probationer I said to her: 'There are so many things to learn they discourage me; shall I ever be able to master them?' and her answer was: 'My dear, erase the word discouragement from your dictionary and your mind; it isn't worthy of a woman who hopes to be a nurse; never let me hear you say it again,' and I obeyed her, much to my after advantage. She was always cheerful and never self-obtrusive, putting her physical feelings aside and working many a day after an almost entirely sleepless night—for she had a heart lesion, and was often ill enough to be in bed, and yet she so disliked to give up that she never really relinquished her duties, and was on duty up to the day she died.



"When her strength began to fail, and the long rounds proved too much for her heart, she made them in a wheel-chair daily, and for many weeks, when too ill to walk, she was carried down to the reception-room on 'recreation evenings,'—the one night in the week given up to an informal dance for the nurses,—that she might keep in touch with them still. A few weeks before her death in a note to me she says, 'My children have spoiled me so that I can't bear a ruffle on the calm which surrounds me now.'

"All came to her with their troubles, whether they had a right to or not. Writing to me from the steamer *Etruria*, when she last went home, she said: 'I am interrupted every minute by old women who come and ask me questions to which I can't reply—the rules of the ship, the run, the precise hour at which we shall reach Queenstown—I believe I must have a kind of inspired look. How should I know?' She spoke in jest, but it was very true; she had indeed an inspired look, which meant not only a brain far above the average, but a pure and lofty woman's soul. She had that keen intuition of character which comes, may I say, to our sex only, and to us but rarely, which was of infinite use to her in dealing with the many people she came in daily contact with. She had studied human nature so well that she read it with surprising clearness, and separated the false from the true usually without fail.

"The patients loved her sincerely, as well they might, for with her advent comfort and cleanliness dawned, and to this day those who knew her talk of her and her nurses, 'The Trainers,' as we were called by them when we first went to the hospital, which title still clings, and to this day no one knows whether it was an abbreviation of 'trained nurse,' coined for the sake of brevity, or a word descriptive of our educational system. She took an individual and personal interest in us, and was never too busy to listen to our complaints or troubles—real or imaginary. Nothing was done mechanically; the human touch showed through everything she did. Never self-seeking herself, she shamed us out of the bickerings which came usually from vanity and selfishness. The common aim—the care and responsibility of human life—was never lost sight of, and all efforts and all work were for that object alone.

"Many were the lessons in worldly wisdom she taught us we who were trained by her will never forget. What a privilege it was to have known her I regret you cannot all appreciate; to have had such an ideal before us was an inspiration in itself, which lifted our lives out of the commonplace. Nothing was accounted paltry or small in a nurse's life; each duty had its own importance and all work a dignity. She believed thoroughly in Herbert's lines:

" 'Who sweeps a room as to Thy laws  
Makes that and every action fine.'

"The evening before her death she was delirious part of the time. She had once said that the last sound on earth she would like to hear would be the voices of the nurses singing hymns, as they were wont to do Sunday evenings. So the organ was brought into the hall and the girls grouped around it and sang her favorites. I shall never forget the scene. As the sound of the clear, girlish voices rang out and floated up the stairs into the bedroom, strains that grew faint and wavering as the sorrow of the singers overpowered them, "What is that?" Miss Fisher asked, rousing out of her lethargy. 'The girls singing,' someone answered. 'My own dear Blockley girls,' she responded. 'I always loved them better than any other.' And so her last wish was realized, for she died in a few hours, and was not conscious many minutes at a time after. To the last her sweet courtesy never left her, and not once was the slightest service rendered that a gracious 'Thank you' did not follow.

" 'In a strange land, a stranger! Low we laid her,  
Coffin'd in English oak; her only pall  
The flag 'neath which her sailor fathers conquer'd—  
Like them, in stress of battle did she fall.  
Only a stranger! Yet our city honors  
With best and foremost sons this sad array:  
And strong men weep; and the triumphant singing  
Breaks into sobs of grief above her clay.  
Only a stranger! With us four short winters!  
"The English nurse," men called her, as they smiled  
In scorn that we should need her, soon forgetting  
The friend they loved was not Columbia's child.  
But now she is our own! For other strangers—  
Our poor and sick—her very life she gave!  
Oh Mother Country, glorying in thy heroes,  
She is our own forever by this grave!'

And to have known her 'is part of our life's unalterable good.'"

Miss MARKHAM.—I move that the vote that was passed this morning adopting By-Law X. be reconsidered.

Seconded by Miss Brobson and carried.

Miss RIDDLE.—I move that we strike out all of the second paragraph (a) down to the period after "necessary," just to make room for the insertion of anything you may want.

Seconded by Miss Paxton and carried.

Miss DAVIDS.—I move that a fourth committee, a Programme Committee, be inserted.

Seconded by Miss Dunderdale and carried.

On motion of Miss Milne, seconded by Miss Riddle, the word "other" in the second paragraph under (a) was stricken out and "local" inserted, reading "it shall make all local arrangements."

On motion of Miss Davids, seconded by Miss Milne, paragraph (a), By-Law X., was accepted as amended.

On motion of Miss Damer, seconded by Miss Russell, paragraph (b) of By-Law X. was accepted as it stands.

On motion of Miss Giles, seconded by Miss Giberson, paragraph (c) of By-Law X. was accepted as printed.

MISS DAMER.—I move that a fourth section under (d) be inserted, that of the Programme Committee, to read as follows: "The Programme Committee shall consist of not less than five members; it shall prepare and arrange the programme of papers and discussions, and in conjunction with the Committee on Publications prepare a complete programme for the entire session and provide as many copies of the same as may be needed. It shall send to the Publication Committee a report of its proceedings within one month after the adjournment of the annual meeting.

Seconded by Miss Davids and carried.

On motion of Miss Davids, seconded by Miss Fleetwood, Section 3 of By-Law X. was accepted as printed.

On motion of Miss Giberson, seconded by Brooklyn, Section 4 of By-Law X. was accepted as printed.

CHAIRMAN.—That brings us to By-Law XI., that of Nominating Committee.

MISS ROSS.—I move that the By-Law XI. on Nominating Committee be amended to read as follows:

"SECTION 1. Immediately after adjournment of the morning session of the last day of the annual meeting the delegates of all the affiliated organizations present shall go into executive session, and a Nominating Committee of five shall be appointed from the floor for the coming year, only one nomination to be made by the delegate of any one organization.

"SECTION 2. It shall be the duty of the Nominating Committee to meet at least one month before the annual meeting and to nominate two or more candidates for every office to be filled at the annual election. A printed list of the nominations shall be given each delegate at the opening of the morning session of the second day of this meeting. Election shall be by ballot and shall be conducted by a judge and two others appointed by the Board of Directors. The polls to be open until the opening of the afternoon session. The candidate for any office who shall receive the highest number of votes is thereby elected."

Seconded by Miss Rhodes and carried.

MISS GILES.—I move that By-Law XI. as amended by Miss Ross be accepted. Seconded by Miss Paxton and carried.

On motion of Miss Davids, seconded by Miss McLaughlin, By-Law XII. was accepted as printed.

On motion of Miss Giles, seconded by Miss Dunn, By-Law XIII. was accepted as printed.

On motion of Brooklyn, seconded by Miss Dunderdale, By-Law XIV. was accepted as printed.

On motion of Miss Duncan, seconded by Miss Jones, By-Law XV. was accepted as printed.

MISS DAMER.—I move that this constitution and by-laws as amended be adopted by the association.

Seconded by Mrs. Lowry and carried.

MISS DAMER.—I move that this constitution go into effect at the close of

this annual meeting, with the exception of Articles V. and XI., which will go into effect immediately.

Seconded by Miss Paxton and carried.

PRESIDENT.—Now this gives us something that we have not had for a long time—viz., a constitution by which we can be governed. The Committee on Revision would like an honorable discharge.

MISS DAMER.—I move that the Committee on the Revision of the Constitution be honorably discharged and their report adopted.

Seconded by Mrs. Wilcox.

SECRETARY.—May I amend that by adding a vote of thanks from the association to the members of the Revision Committee, and especially to Miss Riddle, who, in addition to her duties as president, has had the chairmanship of this committee.

Seconded by Miss McLaughlin and carried.

PRESIDENT.—We have a Committee on Resolutions. Will they now present them?

MISS GILES.—I move that a vote of thanks be extended to the Committee on Arrangements for the management of the entire meeting so far as their part of the work is concerned. They have been most faithful and deserve great credit for their work.

Seconded by Miss Parrish and carried.

MISS DAMER.—I move a vote of thanks be extended the managers of the Philadelphia hospitals, the alumnae associations, and the graduate nurses of Philadelphia for their generous hospitality and their many thoughtful and well-carried out plans for our welfare.

Duly seconded and carried.

MISS RHODES.—I move that a vote of thanks be extended to Miss Spring for the able manner in which she supplied the luncheons.

Seconded by Miss Giles and carried.

MISS DAVIS.—And last, but not by any means least, I should like to move a vote of thanks to the directors of the Drexel Institute for the courteous and substantial interest shown in the progress of the nursing profession by tendering the use of this commodious hall and the freedom of the building for the convention.

PRESIDENT.—I would like to ask if it is your pleasure to refer any question of alliance with the Red Cross Society to the Executive Committee and Board of Directors?

SECRETARY.—I would like to move that since Miss Riddle has already conferred with ladies on the Board of Directors of the Red Cross Society, she be empowered to associate with her two, three, or four people whom she knows to be interested in the matter, and proceed in such manner as the committee thus formed may decide.

Seconded by Miss Dunderdale and carried.

PRESIDENT.—There is another matter to be considered before closing our convention. What shall be done about sending our greetings to the Women's Congress in Berlin?

MISS FREDERICK.—I move that our secretary be asked to convey our greetings as formulated by our Executive Committee to the Women's Congress in Berlin.

Seconded by Miss Milne and carried.

PRESIDENT.—We will now call for the report of the Nominating Committee.

MISS MILNE read the report of that committee:

"The Nominating Committee met in the Drexel Institute at nine-thirty A.M. Saturday, May 14, Miss Ross, Maryland, in the chair; present, Miss Rhodes, New York; Mrs. Higbee, Illinois; Miss Rose Smith, Detroit; Miss Paxton, Washington, D. C.; Miss Russell, Connecticut, Rhode Island, etc.; Miss Metcalfe, Massachusetts, and Miss Milne, Pennsylvania, and would submit the following list of candidates:

- "For president—Miss Riddle; Miss Rudden.
- "For first vice-president—Miss Damer; Miss Greenlees.
- "For second vice-president—Mrs. Hutchinson; Miss Whitaker.
- "For secretary—Miss Delano; Miss Hartman.
- "For treasurer—Miss Way; Mrs. Lowry.
- "For chairman Committee on Arrangements—Miss Nevins.
- "Directors for three years—Miss McIsaac, Miss Nutting, Miss Jennings.
- "Directors for two years—Miss Dolliver, Miss M. E. Smith, Miss McCully.
- "Directors for one year—Miss Goodrich, Miss Casey, Miss Bailey."

MISS HALL.—I move that the report of the Nominating Committee be accepted.

Seconded by Miss Paxton and carried.

On motion of Miss McLaughlin, seconded by Miss Bowen, Miss Healy's name was added to the list of candidates for treasurer.

On motion of Mrs. Fleetwood, duly seconded, Miss Thornton's name was added to the list of candidates for secretary.

On motion, duly seconded, Miss Milne's name was added to the list of candidates for president.

PRESIDENT.—I am now going to ask you to come to order. Do you remember that we provided in our new constitution that the Nominating Committee should be appointed this year for next,—“a Nominating Committee of five to be appointed from the floor”?—and it is our purpose to ask you to go into that while we are waiting for the report of the tellers.

On motion of Miss Giles, seconded by Miss Holden, the name of Miss Milne was placed on the Nominating Committee.

On motion of Miss Fairbank, seconded by Miss Shephard, the name of Miss Bowen was placed on the Nominating Committee.

On motion of Miss Gardner, seconded by Miss Hall, the name of Miss Rudden was placed on the Nominating Committee.

On motion of Miss Kelly, seconded by Miss Holden, the name of Mrs. Higbee was placed on the Nominating Committee.

On motion of Miss McLaughlin, seconded by Miss Curtis, the name of Miss Cabanis was placed on the Nominating Committee.

Miss Milne for the tellers reported the election of the following officers:

President—Miss Riddle.

First vice-president—Miss Damer.

Second vice-president—Miss Whitaker.

Secretary—Miss Thornton.

Treasurer—Miss Healy.

Directors for three years—Miss McIsaac, Miss Nutting.

Directors for two years—Miss Dolliver, Miss M. E. Smith.

Directors for one year—Miss Goodrich, Miss Casey.

PRESIDENT.—You have heard the result of the election. As the hour is late and we are detaining our friends who are waiting outside, we will now adjourn to meet in Washington next year.



**CONSTITUTION AND BY-LAWS OF THE NURSES' ASSOCIATED  
ALUMNÆ OF THE UNITED STATES**

---

**CONSTITUTION.**

**ARTICLE I.**

*Name.*

This association shall be known as the Nurses' Associated Alumnae of the United States.

**ARTICLE II.**

*Objects.*

The objects of this association shall be to strengthen the union of nursing organizations, to elevate nursing education, to promote ethical standards in all the relations of the nursing profession.

**ARTICLE III.**

*Officers.*

The officers of this association shall be a president, a first and a second vice-president, a secretary, and a treasurer. They shall have such duties as shall be hereinafter provided.

**ARTICLE IV.**

*Meetings.*

This association shall hold an annual meeting at such time and place as may be determined upon by the association from year to year.

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**BY-LAWS.**

**I.**

*Eligibility.*

Alumnae associations whose members are graduates from general hospitals giving not less than three full years of training in the hospital, which training may be obtained in one or more hospitals, or include a term in a recognized technical school, shall be eligible for membership in this association by sending thereto accredited delegates and paying annual dues.

**II.**

*Membership.*

The membership in this association shall be divided into active, permanent, and honorary.

Active membership shall consist of delegates duly elected to represent the nursing organizations belonging to this association, including all officers.

Permanent membership shall consist of charter members, former delegates, and officers.

Honorary membership shall consist only of women who shall have rendered distinguished service in the nursing profession.

**III.**

*Annual Meeting.*

The annual meeting of this association shall include all officers of the association and delegates from nursing organizations in such proportion to their numbers as shall be hereinafter specified, permanent members and visitors according to the rules of the association.

## IV.

*Duties of Officers.*

SECTION 1. The president shall preside at the annual meeting and appoint all committees not otherwise provided for. She shall be an ex-officio member of all committees.

SEC. 2. The vice-presidents shall, according to their rank, in the absence of the president perform her duties.

SEC. 3. All officers shall be elected annually.

SEC. 4. The secretary shall keep the minutes of the meeting, conduct the correspondence of the association, and send by mail to the Board of Directors and to the nursing organizations affiliated copies of all such matters as may be necessary. She shall preserve all papers, letters, and unpublished transactions of this association.

SEC. 5. The treasurer shall collect, receive, and have charge of all funds of this association. She shall deposit such funds in a bank of good credit, shall make all her payments by check, and shall pay such bills only as shall have been approved by the president or the chairman of the Executive Committee. She shall submit her reports and accounts every year to the auditor, and shall report to the Executive Committee, whenever requested to do so, the financial standing of the association.

## V.

*Board of Directors.*

SECTION 1. The Board of Directors shall be composed of the president, vice-president, secretary, and treasurer, and six others who shall be appointed from among the permanent members of the association. Six shall be elected the first year, two of whom shall serve for three years, two for two years, and two for one year, and two shall be elected annually thereafter for three years. Nominations for such offices shall be made by the Nominating Committee and election shall be by ballot.

SEC. 2. The Board of Directors shall choose from its own members an Executive Committee of at least five, who shall meet as often as necessary and transact such business as may come before it. They shall report at the annual meetings.

SEC. 3. The Board of Directors shall appoint an Eligibility Committee and such sub-committees as may be required for the proper transaction of business.

SEC. 4. The Executive Committee shall have the treasurer's accounts audited yearly by a professional auditor.

## VI.

*Membership.*

SECTION 1. Active members shall be duly elected delegates from affiliated nursing organizations. They shall be entitled to vote at the annual meetings. They shall be eligible for office.

SEC. 2. Each affiliated organization shall have the privilege of sending to the annual meetings of this association one delegate for every fifty of its members and one delegate for every additional fraction of more than half that number; organizations of less than fifty may send one delegate.

SEC. 3. Affiliated associations with large membership may send delegates with power to vote by proxy, such delegates to bear credentials showing the number of votes to which their organization is entitled.

SEC. 4. Each affiliated association shall notify the secretary of the association of the number of delegates who will be present at the annual meeting at least one month prior to the date of this meeting.

SEC. 5. Permanent members shall bring credentials from their organizations. They shall be entitled to attend all general sessions of the annual meeting and to participate in debate on professional and ethical subjects. They shall continue in these privileges so long as they remain in good standing in their organizations, and after attending three consecutive annual meetings they shall be entitled to vote, and shall be eligible for reelection as officers or delegates at any time. Charter members shall be entitled to vote.

SEC. 6. *Honorary Members.* The names of such proposed members shall be presented at the close of the first session of any annual meeting and shall be voted

upon at the closing session of the same. A unanimous vote of the members present shall be required to elect. Honorary members shall be given all the privileges of the association, but shall not hold office and shall have no votes.

SEC. 7. All nurses in good standing in affiliated organizations may attend all general sessions of this association, but shall not be entitled to the privilege of vote or debate. They shall present a card of admission signed by the president of their organization.

#### VII.

##### *State Organizations.*

A State organization shall become affiliated with this association by sending one delegate at large and the payment of annual dues of five dollars. Its secretary shall send annually a copy of its constitution and by-laws, with the names of its officers and members, to the secretary of this association, who shall transmit it to the Executive Committee.

#### VIII.

##### *Right of Appeal.*

Any affiliated organization may have the right of appeal to the Board of Directors, whose decision shall be final.

#### IX.

##### *Guests.*

The president of this association shall have the privilege of inviting special guests to the general sessions of the annual meeting.

#### X.

##### *Committees.*

SECTION 1. All standing and sub-committees not otherwise provided for shall be appointed from the floor, unless ordered by a vote of the association.

SEC. 2. The standing committees shall be as follows, appointed by the Board of Directors:

- (a) On Arrangements,
- (b) On Publications,
- (c) On Eligibility,
- (d) On Programme.

(a) The Committee on Arrangements shall consist of not less than five members. The chairman of this committee shall be a resident of the city in which the annual meeting is to be held.

It shall make all local arrangements for the meeting and superintend the registration of delegates and permanent members. It shall send to the Publication Committee a report of its proceedings within one month after the adjournment of the annual meeting.

(b) The Publication Committee shall consist of three members, one of whom shall be the secretary.

It shall be the duty of this committee to obtain estimates of cost before printing, and supervise all publications of the association.

(c) It shall be the duty of the Eligibility Committee to investigate the fitness of all nursing organizations applying for membership in this association. They shall report their findings to the Board of Directors, whose decisions as to eligibility shall be final.

(d) The Programme Committee shall consist of not less than five members; it shall prepare and arrange the programme of papers and discussions, and in conjunction with the Committee on Publications prepare a complete programme for the entire session and provide as many copies of the same as may be needed. It shall send to the Publication Committee a report of its proceedings within one month after the adjournment of the annual meeting.

SEC. 3. A majority of any committee shall constitute a quorum unless otherwise provided.

SEC. 4. All standing committees shall report annually.

## XI.

*Nominating Committee.*

The Nominating Committee shall be formed thus:

SECTION 1. Immediately after adjournment of the morning session of the last day of the annual meeting, the delegates of all the affiliated organizations present shall go into executive session, and a Nominating Committee of five shall be appointed from the floor for the coming year, only one nomination to be made by the delegates of any one organization.

SEC. 2. It shall be the duty of the Nominating Committee to meet at least one month before the annual meeting and to nominate two or more candidates for every office to be filled at the annual election. A printed list of the nominations shall be given each delegate at the opening of the morning session of the second day of this meeting. Election shall be by ballot and shall be conducted by a judge and two others appointed by the Board of Directors. The polls to be open until the opening of the afternoon session. The candidate for any office who shall receive the highest number of votes is thereby elected.

## XII.

*Dues and Fees.*

SECTION 1. Each and every alumnae association joining the Nurses' Associated Alumnae of the United States shall pay an initiation fee of five dollars for every fifty members and for every additional fraction of more than half that number. Organizations of less than fifty members shall pay five dollars. This fee shall be paid by the treasurer of each organization within one month after admission into this association.

SEC. 2. This fee shall include annual dues for the first year. Annual dues thereafter to be fixed yearly by the Board of Directors of this association. Annual dues shall be paid to the treasurer at the annual meeting.

SEC. 3. Any nursing organization which shall neglect to pay its annual dues for any year shall not be entitled to send delegates to the annual meeting of this association of that year.

SEC. 4. Any organization which shall fail to pay its dues for two successive years shall cease to belong to this association.

## XIII.

*Fiscal Year.*

The fiscal year shall extend from the end of one annual meeting to the beginning of the next.

## XIV.

*Amendments.*

SECTION 1. Amendments to the constitution shall be proposed in writing at the first session of the second day of the annual meeting, and shall be voted upon at the annual meeting next subsequent to that at which such amendment shall have been proposed, it being provided that each nursing organization shall receive a copy of any proposed amendment at least three months prior to the meeting at which action is to be taken. Provided, further, that when an amendment is properly under consideration, and an amendment is offered thereto germane to the subject, it shall be in order, if adopted, and shall have the same standing and course as if proposed at the preceding meeting of the association.

SEC. 2. Amendments to the by-laws of this association may be effected by a majority vote at any meeting, due notice of such amendment having been given one month prior to the meeting.

SEC. 3. A majority vote of all members present at the meeting shall be required.

## XV.

Deliberations of all meetings of this association shall be governed by the "Woman's Manual of Parliamentary Law," by Harriet R. Shattuck.

## ANNOUNCEMENTS



### PENNSYLVANIA STATE NURSES' ASSOCIATION

The Graduate Nurses' Association of the State of Pennsylvania will hold the third quarterly convention at Erie, Pa., July 20 and 21.

The meetings will be held in the Erie Chamber of Commerce, Marks Building, 914 State Street.

The address of welcome will be given by Dr. James E. Silliman, who is a surgeon of very high standing and a genuine friend of nurses, and is heartily in favor of State registration. The Rev. C. T. Benne, of St. John's Lutheran Church, will offer the invocation. The papers to be read are, "Fees and Charges of the Nurse," "Ethics of Nursing," "The Power of the Press as an Aid to Registration," and Miss Palmer's "A, B, C of Registration."

If all nurses who attended the Philadelphia meeting in June or the Pittsburg meeting in October and have not paid their initiation fees and annual dues will do so before the annual meeting in October they will be considered charter members. All checks should be sent to Miss A. M. Shields, of the Methodist Episcopal Hospital, corner Broad and Wolf Streets, Philadelphia, Pa.

Mrs. GEORGE O. LOEFFLER,  
Chairman Press and Publication Committee.

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THE following resolutions have been adopted by the Graduate Nurses of the Amsterdam Hospital Training-School:

"WHEREAS, Our beloved friend and superintendent, Mrs. M. D. Lingenfelter, has resigned from her position at the Amsterdam Hospital: be it therefore

"Resolved, That we, the graduate nurses of the Amsterdam Hospital Training-School, do most sincerely regret her departure, and wish her success and happiness in whatever she may undertake to do; and

"Resolved, That a copy of these resolutions be sent to her, to THE AMERICAN JOURNAL OF NURSING, and to the Trained Nurse for publication.

"IDA B. MEEKS,

"S. NELL WILLIAMS,

"E. HELENA HOEFFNER,

"Committee."

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SAN FRANCISCO, CAL.—The regular monthly meeting of the Alumnae of the San Francisco Training-School was held in the Nurses' Home, 316 Van Ness Avenue, June 6, 1904. The minutes of the last meeting were read and approved. Five new members were elected and many new names proposed for membership. The alumnae was organized March 31, 1904, through the efforts of Miss M. Palton, then superintendent of the San Francisco Training-School. There are now fifty names on the roll-call.

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THE "Report of the Seventh Annual Convention of the Nurses' Associated Alumnae," including the constitution and by-laws as finally amended, may be obtained by application to Miss M. E. Thornton, 120 East Thirty-first Street, New York City, N. Y.